PART 70 OPERATING PERMIT
OFFICE OF AIR QUALITY

Parkview Hospital
2200 Randallia Drive
Fort Wayne, Indiana 46805

(herein known as the Permittee) is hereby authorized to operate subject to the conditions contained herein, the source described in Section A (Source Summary) of this permit.

This permit is issued in accordance with 326 IAC 2 and 40 CFR Part 70 Appendix A and contains the conditions and provisions specified in 326 IAC 2-7 as required by 42 U.S.C. 7401, et. seq. (Clean Air Act as amended by the 1990 Clean Air Act Amendments), 40 CFR Part 70.6, IC 13-15 and IC 13-17.

Operation Permit No.: T003-11993-00272	
Issued by: Janet G. McCabe, Assistant Commissioner Office of Air Quality	Issuance Date: Expiration Date:

TABLE OF CONTENTS

A SOURCE SUMMARY 5
A.1 General Information [326 IAC 2-7-4(c)] [326 IAC 2-7-5(15)]
A.2 Emission Units and Pollution Control Equipment Summary [326 IAC 2-7-4(c)(3)]
A.3 Specifically Regulated Insignificant Activities [326 IAC 2-7-1(21)] [326 IAC 2-7-4(c)]
A.4 Part 70 Permit Applicability [326 IAC 2-7-2]

B GENERAL CONDITIONS 7
B.1 Definitions [326 IAC 2-7-1]
B.2 Permit Term [326 IAC 2-7-5(2)][326 IAC 2-1.1-9.5]
B.3 Enforceability [326 IAC 2-7-7]
B.4 Termination of Right to Operate [326 IAC 2-7-10] [326 IAC 2-7-4(a)]
B.5 Severability [326 IAC 2-7-5(5)]
B.6 Property Rights or Exclusive Privilege [326 IAC 2-7-5(6)(D)]
B.7 Duty to Supplement and Provide Information [326 IAC 2-7-4(b)] [326 IAC 2-7-5(6)(E)]
B.8 Compliance with Permit Conditions [326 IAC 2-7-5(6)(A)] [326 IAC 2-7-5(6)(B)]
B.9 Certification [326 IAC 2-7-4(f)] [326 IAC 2-7-6(1)] [326 IAC 2-7-5(3)(C)]
B.10 Annual Compliance Certification [326 IAC 2-7-6(5)]
B.11 Preventive Maintenance Plan [326 IAC 2-7-5(1),(3)and (13)][326 IAC 2-7-6(1)and(6)]
B.12 Emergency Provisions [326 IAC 2-7-16]
B.13 Permit Shield [326 IAC 2-7-15] [326 IAC 2-7-20] [326 IAC 2-7-12]
B.14 Prior Permits Superseded [326 IAC 2-1.1-9.5]
B.15 Deviations from Permit Requirements and Conditions [326 IAC 2-7-5(3)(C)(ii)]
B.16 Permit Modification, Reopening, Revocation and Reissuance, or Termination
B.17 Permit Renewal [326 IAC 2-7-4]
B.18 Permit Amendment or Modification [326 IAC 2-7-11][326 IAC 2-7-12]
B.19 Permit Revision Under Economic Incentives and Other Programs
B.20 Operational Flexibility [326 IAC 2-7-20] [326 IAC 2-7-10.5]
B.21 Source Modification Requirement [326 IAC 2-7-10.5]
B.22 Inspection and Entry [326 IAC 2-7-6] [IC 13-14-2-2]
B.23 Transfer of Ownership or Operation [326 IAC 2-7-11]
B.24 Annual Fee Payment [326 IAC 2-7-19] [326 IAC 2-7-5(7)]

C SOURCE OPERATION CONDITIONS 18

Emission Limitations and Standards [326 IAC 2-7-5(1)]
C.1 Particulate Matter Emission Limitations For Processes with Process Weight Rates
C.2 Opacity [326 IAC 5-1]
C.3 Open Burning [326 IAC 4-1] [IC 13-17-9]
C.4 Incineration [326 IAC 4-2] [326 IAC 9-1-2]
C.5 Fugitive Dust Emissions [326 IAC 6-4]
C.6 Operation of Equipment [326 IAC 2-7-6(6)]
C.7 Asbestos Abatement Projects [326 IAC 14-10] [326 IAC 18] [40 CFR 61, Subpart M]

Testing Requirements [326 IAC 2-7-6(1)]
C.8 Performance Testing [326 IAC 3-6]

Compliance Requirements [326 IAC 2-1.1-11]
C.9 Compliance Requirements [326 IAC 2-1.1-11]

Compliance Monitoring Requirements [326 IAC 2-7-5(1)] [326 IAC 2-7-6(1)]
C.10 Compliance Monitoring [326 IAC 2-7-5(3)] [326 IAC 2-7-6(1)]

C.11 Maintenance of Emission Monitoring Equipment [326 IAC 2-7-5(3)(A)(iii)]
C.12 Monitoring Methods [326 IAC 3]
C.13 Pressure Gauge and Other Instrument Specifications [326 IAC 2-1.1-11]

Corrective Actions and Response Steps [326 IAC 2-7-5] [326 IAC 2-7-6]
C.14 Emergency Reduction Plans [326 IAC 1-5-2] [326 IAC 1-5-3]
C.15 Risk Management Plan [326 IAC 2-7-5(12)] [40 CFR 68.215]
C.16 Compliance Response Plan - Preparation, Implementation, Records, and Reports [326 IAC 2-7-5]
C.17 Actions Related to Noncompliance Demonstrated by a Stack Test [326 IAC 2-7-5]

Record Keeping and Reporting Requirements [326 IAC 2-7-5(3)] [326 IAC 2-7-19]
C.18 Emission Statement [326 IAC 2-7-5(3)(C)(iii)] [326 IAC 2-7-5(7)] [326 IAC 2-7-19(c)]
C.19 General Record Keeping Requirements [326 IAC 2-7-5(3)] [326 IAC 2-7-6]
C.20 General Reporting Requirements [326 IAC 2-7-5(3)(C)] [326 IAC 2-1.1-11]

Stratospheric Ozone Protection
C.21 Compliance with 40 CFR 82 and 326 IAC 22-1

D.1 FACILITY OPERATION CONDITIONS - Medical Waste Incinerator (INC) 27

Emission Limitations and Standards [326 IAC 2-7-5(1)]
D.1.1 General Provisions Relating to NSPS [326 IAC 12-1][40 CFR 60, Subpart A]
D.1.2 Hospital/Medical/Infectious Waste Incinerators [326 IAC 11-6] [40 CFR 60, Subpart Ce]
D.1.3 Operator Training and Qualification Requirements [40 CFR 60.34e][40 CFR 60.53c(h)]
D.1.4 Waste Management Plan [326 IAC 11-6-6] [40 CFR 60.35e]
D.1.5 Incinerators [326 IAC 4-2-2]
D.1.6 Carbon Monoxide Emission Limits [326 IAC 9-1-2]
D.1.7 Preventive Maintenance Plan [326 IAC 2-7-5(13)]

Compliance Determination Requirements
D.1.8 Testing Requirements [326 IAC 2-7-6(1),(6)][326 IAC 2-1.1-11]
D.1.9 Hospital/Medical/Infectious Waste Incinerators [326 IAC 11-6] [40 CFR 60, Subpart Ce]

Compliance Monitoring Requirements [326 IAC 2-7-6(1)] [326 IAC 2-7-5(1)]
D.1.10 Monitoring

Record Keeping and Reporting Requirements [326 IAC 2-7-5(3)] [326 IAC 2-7-19]
D.1.11 Record Keeping Requirements
D.1.12 Reporting Requirements

D.2 FACILITY OPERATION CONDITIONS - Natural Gas Fired Boilers 34

Emission Limitations and Standards [326 IAC 2-7-5(1)]
D.2.1 Particulate Matter Limitation (PM) [326 IAC 6-2-3]
D.2.2 Sulfur Dioxide (SO_2) [326 IAC 7-1.1-1] [326 IAC 7-2-1]

Compliance Determination Requirements
D.2.3 Sulfur Dioxide Emissions and Sulfur Content

Compliance Monitoring Requirements [326 IAC 2-7-6(1)] [326 IAC 2-7-5(1)]
D.2.4 Visible Emissions Notations

Record Keeping and Reporting Requirements [326 IAC 2-7-5(3)] [326 IAC 2-7-19]

D.2.5 Record Keeping Requirements
D.2.6 Reporting Requirements

D.3 FACILITY OPERATION CONDITIONS - Insignificant Activities 37

Emission Limitations and Standards [326 IAC 2-7-5(1)]
D.3.1 Volatile Organic Compounds (VOC)
D.3.2 Volatile Organic Compounds (VOC)
D.3.3 Operation Limitation
D.3.4 Particulate Matter [326 IAC 6-3-2]

Record Keeping and Reporting Requirements [326 IAC 2-7-5(3)] [326 IAC 2-7-19]
D.3.5 Record Keeping Requirements

Certification 40
Emergency Occurrence Report 41
Semi-Annual Natural Gas Fired Boiler Certification 43
Quarterly Deviation and Compliance Monitoring Report 44

SECTION A SOURCE SUMMARY

This permit is based on information requested by the Indiana Department of Environmental Management (IDEM), Office of Air Quality (OAQ). The information describing the source contained in conditions A.1 through A.3 is descriptive information and does not constitute enforceable conditions. However, the Permittee should be aware that a physical change or a change in the method of operation that may render this descriptive information obsolete or inaccurate may trigger requirements for the Permittee to obtain additional permits or seek modification of this permit pursuant to 326 IAC 2, or change other applicable requirements presented in the permit application.

A.1 General Information [326 IAC 2-7-4(c)] [326 IAC 2-7-5(15)] [326 IAC 2-7-1(22)]

The Permittee owns and operates a stationary hospital source consisting of a medical waste incinerator and two (2) natural gas fired boilers.

Responsible Official:	Howard Cottier
Source Address:	2200 Randallia Drive, Fort Wayne, Indiana 46805
Mailing Address:	2200 Randallia Drive, Fort Wayne, Indiana 46805
General Source Phone Number:	(219) 484-6636
SIC Code:	8062
County Location:	Allen
Source Location Status:	Attainment for all criteria pollutants
Source Status:	Part 70 Permit Program Minor Source, under PSD Rules; Major Source, Section 112 of the Clean Air Act

A.2 Emission Units and Pollution Control Equipment Summary [326 IAC 2-7-4(c)(3)] [326 IAC 2-7-5(15)]

This stationary source consists of the following emission units and pollution control devices:

(a) One (1) medical waste incinerator, identified as INC, installed in 1984, firing natural gas as supplementary fuel, with a maximum charge rate of 1200 pounds of medical waste per hour, rated at 4.0 million British thermal units (MMBtu) per hour, with a wet scrubber as control, and exhausting to Stack 1.

(b) Two (2) natural gas fired boilers, firing No. 2 distillate fuel oil as backup, identified as Boiler #1 and Boiler #2, installed in 1971, each rated at 39 MMBtu per hour, and each exhausting to Stack 2.

A.3 Specifically Regulated Insignificant Activities [326 IAC 2-7-1(21)] [326 IAC 2-7-4(c)] [326 IAC 2-7-5(15)]

This stationary source also includes the following insignificant activities which are specifically regulated, as defined in 326 IAC 2-7-1(21):

(a) Degreasing operations that do not exceed 145 gallons per 12 months, except if subject to 326 IAC 20-6.

(b) Emergency generators as follows:

(1) Emergency diesel generators not exceeding 1600 horsepower.
- A) Three (3) emergency generators, each rated at 835 HP;
- B) One (1) emergency generator rated at 1310 HP;
- C) One (1) emergency generator rated at 1325 HP;

(2) Natural gas turbines or reciprocating engines not exceeding 16,000 horsepower.

A) Two (2) emergency natural gas turbine generators, each rated at 450 HP.

(c) Grinding and machining operations controlled with fabric filters, scrubbers, mist collectors, wet collectors and electrostatic precipitators with a design grain loading of less than or equal to 0.03 grains per actual cubic foot and a gas flow rate less than or equal to 4000 actual cubic feet per minute, including the following: deburring; buffing; polishing; abrasive blasting; pneumatic conveying; and woodworking operations.

A.4 Part 70 Permit Applicability [326 IAC 2-7-2]

This stationary source is required to have a Part 70 permit by 326 IAC 2-7-2 (Applicability) because:

(a) It is a major source, as defined in 326 IAC 2-7-1(22);

(b) It is a source in a source category designated by the United States Environmental Protection Agency (U.S. EPA) under 40 CFR 70.3 (Part 70 - Applicability).

SECTION B GENERAL CONDITIONS

B.1 Definitions [326 IAC 2-7-1]

Terms in this permit shall have the definition assigned to such terms in the referenced regulation. In the absence of definitions in the referenced regulation, the applicable definitions found in the statutes or regulations (IC 13-11, 326 IAC 1-2 and 326 IAC 2-7) shall prevail.

B.2 Permit Term [326 IAC 2-7-5(2)][326 IAC 2-1.1-9.5]

This permit is issued for a fixed term of five (5) years from the original date, as determined in accordance with IC 4-21.5-3-5(f) and IC 13-15-5-3. Subsequent revisions, modifications, or amendments of this permit do not affect the expiration date.

B.3 Enforceability [326 IAC 2-7-7]

Unless otherwise stated, all terms and conditions in this permit, including any provisions designed to limit the source's potential to emit, are enforceable by IDEM, the United States Environmental Protection Agency (U.S. EPA) and by citizens in accordance with the Clean Air Act.

B.4 Termination of Right to Operate [326 IAC 2-7-10] [326 IAC 2-7-4(a)]

The Permittee's right to operate this source terminates with the expiration of this permit unless a timely and complete renewal application is submitted at least nine (9) months prior to the date of expiration of the source's existing permit, consistent with 326 IAC 2-7-3 and 326 IAC 2-7-4(a).

B.5 Severability [326 IAC 2-7-5(5)]

The provisions of this permit are severable; a determination that any portion of this permit is invalid shall not affect the validity of the remainder of the permit.

B.6 Property Rights or Exclusive Privilege [326 IAC 2-7-5(6)(D)]

This permit does not convey any property rights of any sort or any exclusive privilege.

B.7 Duty to Supplement and Provide Information [326 IAC 2-7-4(b)] [326 IAC 2-7-5(6)(E)] [326 IAC 2-7-6(6)]

(a) The Permittee, upon becoming aware that any relevant facts were omitted or incorrect information was submitted in the permit application, shall promptly submit such supplementary facts or corrected information to:

Indiana Department of Environmental Management
Permits Branch, Office of Air Quality
100 North Senate Avenue, P. O. Box 6015
Indianapolis, Indiana 46206-6015

The submittal by the Permittee does require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(b) The Permittee shall furnish to IDEM, OAQ, within a reasonable time, any information that IDEM, OAQ, may request in writing to determine whether cause exists for modifying, revoking and reissuing, or terminating this permit, or to determine compliance with this permit. The submittal by the Permittee does require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34). Upon request, the Permittee shall also furnish to IDEM, OAQ, copies of records required to be kept by this permit or, for information claimed to be confidential, the Permittee may furnish such records directly to the U. S. EPA along with a claim of confidentiality. [326 IAC 2-7-5(6)(E)]

(c) The Permittee may include a claim of confidentiality in accordance with 326 IAC 17.1. When furnishing copies of requested records directly to U. S. EPA, the Permittee may assert a claim of confidentiality in accordance with 40 CFR 2, Subpart B.

B.8 Compliance with Permit Conditions [326 IAC 2-7-5(6)(A)] [326 IAC 2-7-5(6)(B)]

(a) The Permittee must comply with all conditions of this permit. Noncompliance with any provisions of this permit is grounds for:

(1) Enforcement action;

(2) Permit termination, revocation and reissuance, or modification; or

(3) Denial of a permit renewal application.

(b) Noncompliance with any provision of this permit, except any provision specifically designated as not federally enforceable, constitutes a violation of the Clean Air Act.

(c) It shall not be a defense for the Permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit.

(d) An emergency does constitute an affirmative defense in an enforcement action provided the Permittee complies with the applicable requirements set forth in Section B, Emergency Provisions.

B.9 Certification [326 IAC 2-7-4(f)] [326 IAC 2-7-6(1)] [326 IAC 2-7-5(3)(C)]

(a) Where specifically designated by this permit or required by an applicable requirement, any application form, report, or compliance certification submitted shall contain certification by a responsible official of truth, accuracy, and completeness. This certification shall state that, based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.

(b) One (1) certification shall be included, using the attached Certification Form, with each submittal requiring certification.

(c) A responsible official is defined at 326 IAC 2-7-1(34).

B.10 Annual Compliance Certification [326 IAC 2-7-6(5)]

(a) The Permittee shall annually submit a compliance certification report which addresses the status of the source's compliance with the terms and conditions contained in this permit, including emission limitations, standards, or work practices. The initial certification shall cover the time period from the date of final permit issuance through December 31 of the same year. All subsequent certifications shall cover the time period from January 1 to December 31 of the previous year, and shall be submitted in letter form no later than July 1 of each year to:

Indiana Department of Environmental Management
Compliance Data Section, Office of Air Quality
100 North Senate Avenue, P. O. Box 6015
Indianapolis, Indiana 46206-6015

and

United States Environmental Protection Agency, Region V
Air and Radiation Division, Air Enforcement Branch - Indiana (AE-17J)
77 West Jackson Boulevard
Chicago, Illinois 60604-3590

(b) The annual compliance certification report required by this permit shall be considered timely if the date postmarked on the envelope or certified mail receipt, or affixed by the shipper on the private shipping receipt, is on or before the date it is due. If the document is submitted by any other means, it shall be considered timely if received by IDEM, OAQ, on or before the date it is due.

(c) The annual compliance certification report shall include the following:

(1) The appropriate identification of each term or condition of this permit that is the basis of the certification;

(2) The compliance status;

(3) Whether compliance was continuous or intermittent;

(4) The methods used for determining the compliance status of the source, currently and over the reporting period consistent with 326 IAC 2-7-5(3); and

(5) Such other facts, as specified in Sections D of this permit, as IDEM, OAQ, may require to determine the compliance status of the source.

The submittal by the Permittee does require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

B.11 Preventive Maintenance Plan [326 IAC 2-7-5(1),(3) and (13)] [326 IAC 2-7-6(1) and (6)] [326 IAC 1-6-3]

(a) If required by specific condition(s) in Section D of this permit, the Permittee shall prepare and maintain Preventive Maintenance Plans (PMPs) within ninety (90) day after issuance of this permit, including the following information on each facility:

(1) Identification of the individual(s) responsible for inspecting, maintaining, and repairing emission control devices;

(2) A description of the items or conditions that will be inspected and the inspection schedule for said items or conditions; and

(3) Identification and quantification of the replacement parts that will be maintained in inventory for quick replacement.

If, due to circumstances beyond the Permittee's control, the PMPs cannot be prepared and maintained within the above time frame, the Permittee may extend the date an additional ninety (90) days provided the Permittee notifies:

Indiana Department of Environmental Management
Compliance Branch, Office of Air Quality
100 North Senate Avenue, P. O. Box 6015
Indianapolis, Indiana 46206-6015

The PMP and the PMP extension notification do not require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(b) The Permittee shall implement the PMPs as necessary to ensure that failure to implement a PMP does not cause or contribute to a violation of any limitation on emissions or potential to emit.

(c) A copy of the PMPs shall be submitted to IDEM, OAQ, upon request and within a reasonable time, and shall be subject to review and approval by IDEM, OAQ. IDEM, OAQ, may require the Permittee to revise its PMPs whenever lack of proper maintenance causes or contributes to any violation. The PMP does not require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(d) Records of preventive maintenance shall be retained for a period of at least five (5) years. These records shall be kept at the source location for a minimum of three (3) years. The records may be stored elsewhere for the remaining two (2) years as long as they are available upon request. If the Commissioner makes a request for records to the Permittee, the Permittee shall furnish the records to the Commissioner within a reasonable time.

B.12 Emergency Provisions [326 IAC 2-7-16]

(a) An emergency, as defined in 326 IAC 2-7-1(12), is not an affirmative defense for an action brought for noncompliance with a federal or state health-based emission limitation.

(b) An emergency, as defined in 326 IAC 2-7-1(12), constitutes an affirmative defense to an action brought for noncompliance with a technology-based emission limitation if the affirmative defense of an emergency is demonstrated through properly signed, contemporaneous operating logs or other relevant evidence that describe the following:

(1) An emergency occurred and the Permittee can, to the extent possible, identify the causes of the emergency;

(2) The permitted facility was at the time being properly operated;

(3) During the period of an emergency, the Permittee took all reasonable steps to minimize levels of emissions that exceeded the emission standards or other requirements in this permit;

(4) For each emergency lasting one (1) hour or more, the Permittee notified IDEM, OAQ, within four (4) daytime business hours after the beginning of the emergency, or after the emergency was discovered or reasonably should have been discovered;

Telephone Number: 1-800-451-6027 (ask for Office of Air Quality, Compliance Section), or
Telephone Number: 317-233-5674 (ask for Compliance Section)
Facsimile Number: 317-233-5967

(5) For each emergency lasting one (1) hour or more, the Permittee submitted the attached Emergency Occurrence Report Form or its equivalent, either by mail or facsimile to:

Indiana Department of Environmental Management

Compliance Branch, Office of Air Quality
100 North Senate Avenue, P. O. Box 6015
Indianapolis, Indiana 46206-6015

within two (2) working days of the time when emission limitations were exceeded due to the emergency.

The notice fulfills the requirement of 326 IAC 2-7-5(3)(C)(ii) and must contain the following:

(A) A description of the emergency;

(B) Any steps taken to mitigate the emissions; and

(C) Corrective actions taken.

The notification which shall be submitted by the Permittee does not require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(6) The Permittee immediately took all reasonable steps to correct the emergency.

(c) In any enforcement proceeding, the Permittee seeking to establish the occurrence of an emergency has the burden of proof.

(d) This emergency provision supersedes 326 IAC 1-6 (Malfunctions). This permit condition is in addition to any emergency or upset provision contained in any applicable requirement.

(e) IDEM, OAQ, may require that the Preventive Maintenance Plans required under 326 IAC 2-7-4-(c)(10) be revised in response to an emergency.

(f) Failure to notify IDEM, OAQ, by telephone or facsimile of an emergency lasting more than one (1) hour in accordance with (b)(4) and (5) of this condition shall constitute a violation of 326 IAC 2-7 and any other applicable rules.

(g) If the emergency situation causes a deviation from a technology-based limit, the Permittee may continue to operate the affected emitting facilities during the emergency provided the Permittee immediately takes all reasonable steps to correct the emergency and minimize emissions.

B.13 Permit Shield [326 IAC 2-7-15] [326 IAC 2-7-20] [326 IAC 2-7-12]

(a) Pursuant to 326 IAC 2-7-15, the Permittee has been granted a permit shield. The permit shield provides that compliance with the conditions of this permit shall be deemed in compliance with any applicable requirements as of the date of permit issuance, provided that either the applicable requirements are included and specifically identified in this permit or the permit contains an explicit determination or concise summary of a determination that other specifically identified requirements are not applicable. The Indiana statutes from IC 13 and rules from 326 IAC, referenced in conditions in this permit, are those applicable at the time the permit was issued. The issuance or possession of this permit shall not alone constitute a defense against an alleged violation of any law, regulation or standard, except for the requirement to obtain a Part 70 permit under 326 IAC 2-7 or for applicable requirements for which a permit shield has been granted.

This permit shield does not extend to applicable requirements which are promulgated after the date of issuance of this permit unless this permit has been modified to reflect such new requirements.

(b) If, after issuance of this permit, it is determined that the permit is in nonconformance with an applicable requirement that applied to the source on the date of permit issuance, IDEM, OAQ, shall immediately take steps to reopen and revise this permit and issue a compliance order to the Permittee to ensure expeditious compliance with the applicable requirement until the permit is reissued. The permit shield shall continue in effect so long as the Permittee is in compliance with the compliance order.

(c) No permit shield shall apply to any permit term or condition that is determined after issuance of this permit to have been based on erroneous information supplied in the permit application. Erroneous information means information that the Permittee knew to be false, or in the exercise of reasonable care should have been known to be false, at the time the information was submitted.

(d) Nothing in 326 IAC 2-7-15 or in this permit shall alter or affect the following:

(1) The provisions of Section 303 of the Clean Air Act (emergency orders), including the authority of the U.S. EPA under Section 303 of the Clean Air Act;

(2) The liability of the Permittee for any violation of applicable requirements prior to or at the time of this permit's issuance;

(3) The applicable requirements of the acid rain program, consistent with Section 408(a) of the Clean Air Act; and

(4) The ability of U.S. EPA to obtain information from the Permittee under Section 114 of the Clean Air Act.

(e) This permit shield is not applicable to any change made under 326 IAC 2-7-20(b)(2) (Sections 502(b)(10) of the Clean Air Act changes) and 326 IAC 2-7-20(c)(2) (trading based on State Implementation Plan (SIP) provisions).

(f) This permit shield is not applicable to modifications eligible for group processing until after IDEM, OAQ, has issued the modifications. [326 IAC 2-7-12(c)(7)]

(g) This permit shield is not applicable to minor Part 70 permit modifications until after IDEM, OAQ, has issued the modification. [326 IAC 2-7-12(b)(7)]

B.14 Prior Permits Superseded [326 IAC 2-1.1-9.5]

(a) All terms and conditions of previous permits issued pursuant to permitting programs approved into the state implementation plan have been either

(1) incorporated as originally stated,

(2) revised, or

(3) deleted

by this permit.

(b) All previous registrations and permits are superseded by this permit.

B.15 Deviations from Permit Requirements and Conditions [326 IAC 2-7-5(3)(C)(ii)]

(a) Deviations from any permit requirements (for emergencies see Section B - Emergency Provisions), the probable cause of such deviations, and any response steps or preventive measures taken shall be reported to:

Indiana Department of Environmental Management
Compliance Data Section, Office of Air Quality
100 North Senate Avenue, P.O. Box 6015
Indianapolis, Indiana 46206-6015

using the attached Quarterly Deviation and Compliance Monitoring Report, or its equivalent. A deviation required to be reported pursuant to an applicable requirement that exists independent of this permit, shall be reported according to the schedule stated in the applicable requirement and does not need to be included in this report.

The Quarterly Deviation and Compliance Monitoring Report does require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(b) A deviation is an exceedance of a permit limitation or a failure to comply with a requirement of the permit.

(a) Emergencies shall be included in the Quarterly Deviation and Compliance Monitoring Report.

B.16 Permit Modification, Reopening, Revocation and Reissuance, or Termination [326 IAC 2-7-5(6)(C)] [326 IAC 2-7-8(a)] [326 IAC 2-7-9]

(a) This permit may be modified, reopened, revoked and reissued, or terminated for cause. The filing of a request by the Permittee for a Part 70 permit modification, revocation and reissuance, or termination, or of a notification of planned changes or anticipated noncompliance does not stay any condition of this permit. [326 IAC 2-7-5(6)(C)] The notification by the Permittee does require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(b) This permit shall be reopened and revised under any of the circumstances listed in IC 13-15-7-2 or if IDEM, OAQ, determines any of the following:

(1) That this permit contains a material mistake.

(2) That inaccurate statements were made in establishing the emissions standards or other terms or conditions.

(3) That this permit must be revised or revoked to assure compliance with an applicable requirement. [326 IAC 2-7-9(a)(3)]

(c) Proceedings by IDEM, OAQ, to reopen and revise this permit shall follow the same procedures as apply to initial permit issuance and shall affect only those parts of this permit for which cause to reopen exists. Such reopening and revision shall be made as expeditiously as practicable. [326 IAC 2-7-9(b)]

(d) The reopening and revision of this permit, under 326 IAC 2-7-9(a), shall not be initiated

before notice of such intent is provided to the Permittee by IDEM, OAQ, at least thirty (30) days in advance of the date this permit is to be reopened, except that IDEM, OAQ, may provide a shorter time period in the case of an emergency. [326 IAC 2-7-9(c)]

B.17 Permit Renewal [326 IAC 2-7-4]

(a) The application for renewal shall be submitted using the application form or forms prescribed by IDEM, OAQ, and shall include the information specified in 326 IAC 2-7-4. Such information shall be included in the application for each emission unit at this source, except those emission units included on the trivial or insignificant activities list contained in 326 IAC 2-7-1(21) and 326 IAC 2-7-1(40). The renewal application does require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

Request for renewal shall be submitted to:

Indiana Department of Environmental Management
Permits Branch, Office of Air Quality
100 North Senate Avenue, P.O. Box 6015
Indianapolis, Indiana 46206-6015

(b) Timely Submittal of Permit Renewal [326 IAC 2-7-4(a)(1)(D)]

(1) A timely renewal application is one that is:

(A) Submitted at least nine (9) months prior to the date of the expiration of this permit; and

(B) If the date postmarked on the envelope or certified mail receipt, or affixed by the shipper on the private shipping receipt, is on or before the date it is due. If the document is submitted by any other means, it shall be considered timely if received by IDEM, OAQ, on or before the date it is due.

(2) If IDEM, OAQ, upon receiving a timely and complete permit application, fails to issue or deny the permit renewal prior to the expiration date of this permit, this existing permit shall not expire and all terms and conditions shall continue in effect, including any permit shield provided in 326 IAC 2-7-15, until the renewal permit has been issued or denied.

(c) Right to Operate After Application for Renewal [326 IAC 2-7-3]
If the Permittee submits a timely and complete application for renewal of this permit, the source's failure to have a permit is not a violation of 326 IAC 2-7 until IDEM, OAQ, takes final action on the renewal application, except that this protection shall cease to apply if, subsequent to the completeness determination, the Permittee fails to submit by the deadline specified in writing by IDEM, OAQ, any additional information identified as being needed to process the application.

(d) United States Environmental Protection Agency Authority [326 IAC 2-7-8(e)]
If IDEM, OAQ, fails to act in a timely way on a Part 70 permit renewal, the U.S. EPA may invoke its authority under Section 505(e) of the Clean Air Act to terminate or revoke and reissue a Part 70 permit.

B.18 Permit Amendment or Modification [326 IAC 2-7-11] [326 IAC 2-7-12]

(a) Permit amendments and modifications are governed by the requirements of 326 IAC 2-7-11 or 326 IAC 2-7-12 whenever the Permittee seeks to amend or modify this permit.

(b) Any application requesting an amendment or modification of this permit shall be submitted to:

Indiana Department of Environmental Management
Permits Branch, Office of Air Quality
100 North Senate Avenue, P.O. Box 6015
Indianapolis, Indiana 46206-6015

Any such application shall be certified by the "responsible official" as defined by 326 IAC 2-7-1(34).

(c) The Permittee may implement administrative amendment changes addressed in the request for an administrative amendment immediately upon submittal of the request. [326 IAC 2-7-11(c)(3)]

B.19 Permit Revision Under Economic Incentives and Other Programs [326 IAC 2-7-5(8)] [326 IAC 2-7-12 (b)(2)]

(a) No Part 70 permit revision shall be required under any approved economic incentives, marketable Part 70 permits, emissions trading, and other similar programs or processes for changes that are provided for in a Part 70 permit.

(b) Notwithstanding 326 IAC 2-7-12(b)(1)(D)(i) and 326 IAC 2-7-12(c)(1), minor Part 70 permit modification procedures may be used for Part 70 modifications involving the use of economic incentives, marketable Part 70 permits, emissions trading, and other similar approaches to the extent that such minor Part 70 permit modification procedures are explicitly provided for in the applicable State Implementation Plan (SIP) or in applicable requirements promulgated or approved by the U.S. EPA.

B.20 Operational Flexibility [326 IAC 2-7-20] [326 IAC 2-7-10.5]

(a) The Permittee may make any change or changes at the source that are described in 326 IAC 2-7-20(b), (c), or (e), without a prior permit revision, if each of the following conditions is met:

(1) The changes are not modifications under any provision of Title I of the Clean Air Act;

(2) Any preconstruction approval required by 326 IAC 2-7-10.5 has been obtained;

(3) The changes do not result in emissions which exceed the emissions allowable under this permit (whether expressed herein as a rate of emissions or in terms of total emissions);

(4) The Permittee notifies the:

Indiana Department of Environmental Management
Permits Branch, Office of Air Quality
100 North Senate Avenue, P. O. Box 6015
Indianapolis, Indiana 46206-6015

and

United States Environmental Protection Agency, Region V
Air and Radiation Division, Regulation Development Branch - Indiana (AR-18J)
77 West Jackson Boulevard
Chicago, Illinois 60604-3590

in advance of the change by written notification at least ten (10) days in advance of the proposed change. The Permittee shall attach every such notice to the Permittee's copy of this permit; and

(5) The Permittee maintains records on-site which document, on a rolling five (5) year basis, all such changes and emissions trading that are subject to 326 IAC 2-7-20(b), (c), or (e) and makes such records available, upon reasonable request, for public review.

Such records shall consist of all information required to be submitted to IDEM, OAQ, in the notices specified in 326 IAC 2-7-20(b), (c)(1), and (e)(2).

(b) The Permittee may make Section 502(b)(10) of the Clean Air Act changes (this term is defined at 326 IAC 2-7-1(36)) without a permit revision, subject to the constraint of 326 IAC 2-7-20(a). For each such Section 502(b)(10) of the Clean Air Act change, the required written notification shall include the following:

(1) A brief description of the change within the source;

(2) The date on which the change will occur;

(3) Any change in emissions; and

(4) Any permit term or condition that is no longer applicable as a result of the change.

The notification which shall be submitted is not considered an application form, report or compliance certification. Therefore, the notification by the Permittee does not require the certification by the “responsible official” as defined by 326 IAC 2-7-1(34).

(c) Emission Trades [326 IAC 2-7-20(c)]
The Permittee may trade increases and decreases in emissions in the source, where the applicable SIP provides for such emission trades without requiring a permit revision, subject to the constraints of Section (a) of this condition and those in 326 IAC 2-7-20(c).

(d) Alternative Operating Scenarios [326 IAC 2-7-20(d)]
The Permittee may make changes at the source within the range of alternative operating scenarios that are described in the terms and conditions of this permit in accordance with 326 IAC 2-7-5(9). No prior notification of IDEM, OAQ, or U.S. EPA is required.

B.21 Source Modification Requirement [326 IAC 2-7-10.5]

A modification, construction, or reconstruction is governed by 326 IAC 2 and 326 IAC 2-7-10.5.

B.22 Inspection and Entry [326 IAC 2-7-6] [IC 13-14-2-2]

Upon presentation of proper identification cards, credentials, and other documents as may be

required by law, and subject to the Permittee's right under all applicable laws and regulations to assert that the information collected by the agency is confidential and entitled to be treated as such, the Permittee shall allow IDEM, OAQ, U.S. EPA, or an authorized representative to perform the following:

(a) Enter upon the Permittee's premises where a Part 70 source is located, or emissions related activity is conducted, or where records must be kept under the conditions of this permit;

(b) Have access to and copy any records that must be kept under the conditions of this permit;

(c) Inspect any facilities, equipment (including monitoring and air pollution control equipment), practices, or operations regulated or required under this permit;

(d) Sample or monitor substances or parameters for the purpose of assuring compliance with this permit or applicable requirements; and

(e) Utilize any photographic, recording, testing, monitoring, or other equipment for the purpose of assuring compliance with this permit or applicable requirements.

B.23 Transfer of Ownership or Operational Control [326 IAC 2-7-11]

(a) The Permittee must comply with the requirements of 326 IAC 2-7-11 whenever the Permittee seeks to change the ownership or operational control of the source and no other change in the permit is necessary.

(b) Any application requesting a change in the ownership or operational control of the source shall contain a written agreement containing a specific date for transfer of permit responsibility, coverage and liability between the current and new Permittee. The application shall be submitted to:

Indiana Department of Environmental Management
Permits Branch, Office of Air Quality
100 North Senate Avenue, P.O. Box 6015
Indianapolis, Indiana 46206-6015

The application which shall be submitted by the Permittee does require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(c) The Permittee may implement administrative amendment changes addressed in the request for an administrative amendment immediately upon submittal of the request. [326 IAC 2-7-11(c)(3)]

B.24 Annual Fee Payment [326 IAC 2-7-19] [326 IAC 2-7-5(7)]

(a) The Permittee shall pay annual fees to IDEM, OAQ, within thirty (30) calendar days of receipt of a billing. Pursuant to 326 IAC 2-7-19(b), if the Permittee does not receive a bill from IDEM, OAQ, the applicable fee is due April 1 of each year.

(b) Except as provided in 326 IAC 2-7-19(e), failure to pay may result in administrative enforcement action or revocation of this permit.

(c) The Permittee may call the following telephone numbers: 1-800-451-6027 or 317-233-0425

(ask for OAQ, Technical Support and Modeling Section), to determine the appropriate permit fee.

SECTION C **SOURCE OPERATION CONDITIONS**

Entire Source

Emission Limitations and Standards [326 IAC 2-7-5(1)]

C.1 Particulate Matter Emission Limitations For Processes with Process Weight Rates Less Than One Hundred (100) pounds per hour [326 IAC 6-3-2(c)]

Pursuant to 326 IAC 6-3-2(c), the allowable particulate matter emissions rate from any process not already regulated by 326 IAC 6-1 or any New Source Performance Standard, and which has a maximum process weight rate less than 100 pounds per hour shall not exceed 0.551 pounds per hour.

C.2 Opacity [326 IAC 5-1]

Pursuant to 326 IAC 5-1-2 (Opacity Limitations), except as provided in 326 IAC 5-1-3 (Temporary Alternative Opacity Limitations), opacity shall meet the following, unless otherwise stated in this permit:

(a) Opacity shall not exceed an average of forty percent (40%) in any one (1) six (6) minute averaging period as determined in 326 IAC 5-1-4.

(b) Opacity shall not exceed sixty percent (60%) for more than a cumulative total of fifteen (15) minutes (sixty (60) readings as measured according to 40 CFR 60, Appendix A, Method 9 or fifteen (15) one (1) minute nonoverlapping integrated averages for a continuous opacity monitor) in a six (6) hour period.

C.3 Open Burning [326 IAC 4-1] [IC 13-17-9]

The Permittee shall not open burn any material except as provided in 326 IAC 4-1-3, 326 IAC 4-1-4 or 326 IAC 4-1-6. The previous sentence notwithstanding, the Permittee may open burn in accordance with an open burning approval issued by the Commissioner under 326 IAC 4-1-4.1. 326 IAC 4-1-3 (a)(2)(A) and (B) are not federally enforceable.

C.4 Incineration [326 IAC 4-2] [326 IAC 9-1-2]

The Permittee shall not operate an incinerator or incinerate any waste or refuse except as provided in 326 IAC 4-2 and 326 IAC 9-1-2. 326 IAC 9-1-2 is not federally enforceable.

C.5 Fugitive Dust Emissions [326 IAC 6-4]

The Permittee shall not allow fugitive dust to escape beyond the property line or boundaries of the property, right-of-way, or easement on which the source is located, in a manner that would violate 326 IAC 6-4 (Fugitive Dust Emissions). 326 IAC 6-4-2(4) is not federally enforceable.

C.6 Operation of Equipment [326 IAC 2-7-6(6)]

Except as otherwise provided by statute or rule, or in this permit, all air pollution control equipment listed in this permit and used to comply with an applicable requirement shall be operated at all times that the emission units vented to the control equipment are in operation.

C.7 Asbestos Abatement Projects [326 IAC 14-10] [326 IAC 18] [40 CFR 61, Subpart M]

(a) Notification requirements apply to each owner or operator. If the combined amount of regulated asbestos containing material (RACM) to be stripped, removed or disturbed is at least 260 linear feet on pipes or 160 square feet on other facility components, or at least thirty-five (35) cubic feet on all facility components, then the notification requirements of

326 IAC 14-10-3 are mandatory. All demolition projects require notification whether or not asbestos is present.

(b) The Permittee shall ensure that a written notification is sent on a form provided by the Commissioner at least ten (10) working days before asbestos stripping or removal work or before demolition begins, per 326 IAC 14-10-3, and shall update such notice as necessary, including, but not limited to the following:

(1) When the amount of affected asbestos containing material increases or decreases by at least twenty percent (20%); or

(2) If there is a change in the following:

(A) Asbestos removal or demolition start date;

(B) Removal or demolition contractor; or

(C) Waste disposal site.

(c) The Permittee shall ensure that the notice is postmarked or delivered according to the guidelines set forth in 326 IAC 14-10-3(2).

(d) The notice to be submitted shall include the information enumerated in 326 IAC 14-10-3(3).

All required notifications shall be submitted to:

Indiana Department of Environmental Management
Asbestos Section, Office of Air Quality
100 North Senate Avenue, P.O. Box 6015
Indianapolis, Indiana 46206-6015

The notice shall include a signed certification from the owner or operator that the information provided in this notification is correct and that only Indiana licensed workers and project supervisors will be used to implement the asbestos removal project. The notifications do not require a certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(e) Procedures for Asbestos Emission Control
The Permittee shall comply with the applicable emission control procedures in 326 IAC 14-10-4 and 40 CFR 61.145(c). Per 326 IAC 14-10-4, emission control requirements are applicable for any removal or disturbance of RACM greater than three (3) linear feet on pipes or three (3) square feet on any other facility components or a total of at least 0.75 cubic feet on all facility components.

(f) Indiana Accredited Asbestos Inspector
The Permittee shall comply with 326 IAC 14-10-1(a) that requires the owner or operator, prior to a renovation/demolition, to use an Indiana Accredited Asbestos Inspector to thoroughly inspect the affected portion of the facility for the presence of asbestos. The requirement that the inspector be accredited, pursuant to the provisions of 40 CFR 61, Subpart M, is federally enforceable.

Testing Requirements [326 IAC 2-7-6(1)]

C.8 Performance Testing [326 IAC 3-6]

(a) All testing shall be performed according to the provisions of 326 IAC 3-6 (Source Sampling Procedures), except as provided elsewhere in this permit, utilizing any applicable procedures and analysis methods specified in 40 CFR 51, 40 CFR 60, 40 CFR 61, 40 CFR 63, 40 CFR 75, or other procedures approved by IDEM, OAQ.

A test protocol, except as provided elsewhere in this permit, shall be submitted to:

Indiana Department of Environmental Management
Compliance Data Section, Office of Air Quality
100 North Senate Avenue, P. O. Box 6015
Indianapolis, Indiana 46206-6015

no later than thirty-five (35) days prior to the intended test date. The protocol submitted by the Permittee does not require certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(b) The Permittee shall notify IDEM, OAQ of the actual test date at least fourteen (14) days prior to the actual test date. The notification submitted by the Permittee does not require certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(c) Pursuant to 326 IAC 3-6-4(b), all test reports must be received by IDEM, OAQ not later than forty-five (45) days after the completion of the testing. An extension may be granted by IDEM, OAQ, if the source submits to IDEM, OAQ, a reasonable written explanation not later than five (5) days prior to the end of the initial forty-five (45) day period.

Compliance Requirements [326 IAC 2-1.1-11]

C.9 Compliance Requirements [326 IAC 2-1.1-11]

The commissioner may require stack testing, monitoring, or reporting at any time to assure compliance with all applicable requirements. Any monitoring or testing shall be performed in accordance with 326 IAC 3 or other methods approved by the commissioner or the U. S. EPA.

Compliance Monitoring Requirements [326 IAC 2-7-5(1)] [326 IAC 2-7-6(1)]

C.10 Compliance Monitoring [326 IAC 2-7-5(3)] [326 IAC 2-7-6(1)]

Unless otherwise specified in this permit, all monitoring and record keeping requirements not already legally required shall be implemented within ninety (90) days of permit issuance. If required by Section D, the Permittee shall be responsible for installing any necessary equipment and initiating any required monitoring related to that equipment. If due to circumstances beyond its control, that equipment cannot be installed and operated within ninety (90) days, the Permittee may extend the compliance schedule related to the equipment for an additional ninety (90) days provided the Permittee notifies:

Indiana Department of Environmental Management
Compliance Branch, Office of Air Quality
100 North Senate Avenue, P. O. Box 6015
Indianapolis, Indiana 46206-6015

in writing, prior to the end of the initial ninety (90) day compliance schedule, with full justification of

the reasons for the inability to meet this date.

The notification which shall be submitted by the Permittee does require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

Unless otherwise specified in the approval for the new emission unit(s), compliance monitoring for new emission units or emission units added through a source modification shall be implemented when operation begins.

C.11 Maintenance of Emission Monitoring Equipment [326 IAC 2-7-5(3)(A)(iii)]

(a) In the event that a breakdown of the emission monitoring equipment occurs, a record shall be made of the times and reasons of the breakdown and efforts made to correct the problem. To the extent practicable, supplemental or intermittent monitoring of the parameter should be implemented at intervals no less frequent than required in Section D of this permit until such time as the monitoring equipment is back in operation. In the case of continuous monitoring, supplemental or intermittent monitoring of the parameter should be implemented at intervals no less often than once an hour until such time as the continuous monitor is back in operation.

(b) The Permittee shall install, calibrate, quality assure, maintain, and operate all necessary monitors and related equipment. In addition, prompt corrective action shall be initiated whenever indicated.

C.12 Monitoring Methods [326 IAC 3] [40 CFR 60] [40 CFR 63]

Any monitoring or testing required by Section D of this permit shall be performed according to the provisions of 326 IAC 3, 40 CFR 60, Appendix A, 40 CFR 60 Appendix B, 40 CFR 63, or other approved methods as specified in this permit.

C.13 Pressure Gauge and Other Instrument Specifications [326 IAC 2-1.1-11] [326 IAC 2-7-5(3)] [326 IAC 2-7-6(1)]

(a) Whenever a condition in this permit requires the measurement of pressure drop across any part of the unit or its control device, the gauge employed shall have a scale such that the expected normal reading shall be no less than twenty percent (20%) of full scale and be accurate within plus or minus two percent (±2%) of full scale reading.

(b) Whenever a condition in this permit requires the measurement of a temperature, flow rate, or pH level, the instrument employed shall have a scale such that the expected normal reading shall be no less than twenty percent (20%) of full scale and be accurate within plus or minus two percent (±2%) of full scale reading.

(c) The Permittee may request the IDEM, OAQ approve the use of a pressure gauge or other instrument that does not meet the above specifications provided the Permittee can demonstrate an alternative pressure gauge or other instrument specification will adequately ensure compliance with permit conditions requiring the measurement of pressure drop or other parameters.

Corrective Actions and Response Steps [326 IAC 2-7-5] [326 IAC 2-7-6]

C.14 Emergency Reduction Plans [326 IAC 1-5-2] [326 IAC 1-5-3]

Pursuant to 326 IAC 1-5-2 (Emergency Reduction Plans; Submission):

(a) The Permittee shall prepare written emergency reduction plans (ERPs) consistent with

safe operating procedures.

(b) These ERPs shall be submitted for approval to:

Indiana Department of Environmental Management
Compliance Branch, Office of Air Quality
100 North Senate Avenue, P.O. Box 6015
Indianapolis, Indiana 46206-6015

within ninety (90) days after the date of issuance of this permit.

The ERP does require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(c) If the ERP is disapproved by IDEM, OAQ, the Permittee shall have an additional thirty (30) days to resolve the differences and submit an approvable ERP.

(d) These ERPs shall state those actions that will be taken, when each episode level is declared, to reduce or eliminate emissions of the appropriate air pollutants.

(e) Said ERPs shall also identify the sources of air pollutants, the approximate amount of reduction of the pollutants, and a brief description of the manner in which the reduction will be achieved.

(f) Upon direct notification by IDEM, OAQ, that a specific air pollution episode level is in effect, the Permittee shall immediately put into effect the actions stipulated in the approved ERP for the appropriate episode level. [326 IAC 1-5-3]

C.15 Risk Management Plan [326 IAC 2-7-5(12)] [40 CFR 68.215]

If a regulated substance, subject to 40 CFR 68, is present at a source in more than a threshold quantity, 40 CFR 68 is an applicable requirement and the Permittee shall submit:

(a) A compliance schedule for meeting the requirements of 40 CFR 68; or

(b) As a part of the annual compliance certification submitted under 326 IAC 2-7-6(5), a certification statement that the source is in compliance with all the requirements of 40 CFR 68, including the registration and submission of a Risk Management Plan (RMP);

All documents submitted pursuant to this condition shall include the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

C.16 Compliance Response Plan - Preparation, Implementation, Records, and Reports [326 IAC 2-7-5] [326 IAC 2-7-6]

(a) The Permittee is required to prepare a Compliance Response Plan (CRP) for each compliance monitoring condition of this permit. A CRP shall be submitted to IDEM, OAQ upon request. The CRP shall be prepared within ninety (90) days after issuance of this permit by the Permittee, supplemented from time to time by the Permittee, maintained on site, and comprised of:

(1) Reasonable response steps that may be implemented in the event that a response step is needed pursuant to the requirements of Section D of this permit; and an expected time frame for taking reasonable response steps.

(2) If, at any time, the Permittee takes reasonable response steps that are not set forth in the Permittee's current Compliance Response Plan and the Permittee documents such response in accordance with subsection (e) below, the Permittee shall amend its Compliance Response Plan to include such response steps taken.

(b) For each compliance monitoring condition of this permit, reasonable response steps shall be taken when indicated by the provisions of that compliance monitoring condition as follows:

(1) Reasonable response steps shall be taken as set forth in the Permittee's current Compliance Response Plan; or

(2) If none of the reasonable response steps listed in the Compliance Response Plan is applicable or responsive to the excursion, the Permittee shall devise and implement additional response steps as expeditiously as practical. Taking such additional response steps shall not be considered a deviation from this permit so long as the Permittee documents such response steps in accordance with this condition.

(3) If the Permittee determines that additional response steps would necessitate that the emissions unit or control device be shut down, the IDEM, OAQ shall be promptly notified of the expected date of the shut down, the status of the applicable compliance monitoring parameter with respect to normal, and the results of the actions taken up to the time of notification.

(4) Failure to take reasonable response steps shall constitute a violation of the permit.

(c) The Permittee is not required to take any further response steps for any of the following reasons:

(1) A false reading occurs due to the malfunction of the monitoring equipment and prompt action was taken to correct the monitoring equipment.

(2) The Permittee has determined that the compliance monitoring parameters established in the permit conditions are technically inappropriate, has previously submitted a request for a minor permit modification to the permit, and such request has not been denied.

(3) An automatic measurement was taken when the process was not operating.

(4) The process has already returned or is returning to operating within "normal" parameters and no response steps are required.

(d) When implementing reasonable steps in response to a compliance monitoring condition, if the Permittee determines that an exceedance of an emission limitation has occurred, the Permittee shall report such deviations pursuant to Section B-Deviations from Permit Requirements and Conditions.

(e) The Permittee shall record all instances when response steps are taken. In the event of an emergency, the provisions of 326 IAC 2-7-16 (Emergency Provisions) requiring prompt corrective action to mitigate emissions shall prevail.

(f) Except as otherwise provided by a rule or provided specifically in Section D, all monitoring as required in Section D shall be performed when the emission unit is operating, except for time necessary to perform quality assurance and maintenance activities.

C.17 Actions Related to Noncompliance Demonstrated by a Stack Test [326 IAC 2-7-5] [326 IAC 2-7-6]

(a) When the results of a stack test performed in conformance with Section C - Performance Testing, of this permit exceed the level specified in any condition of this permit, the Permittee shall take appropriate response actions. The Permittee shall submit a description of these response actions to IDEM, OAQ, within thirty (30) days of receipt of the test results. The Permittee shall take appropriate action to minimize excess emissions from the affected facility while the response actions are being implemented.

(b) A retest to demonstrate compliance shall be performed within one hundred twenty (120) days of receipt of the original test results. Should the Permittee demonstrate to IDEM, OAQ that retesting in one-hundred and twenty (120) days is not practicable, IDEM, OAQ may extend the retesting deadline.

(c) IDEM, OAQ reserves the authority to take any actions allowed under law in response to noncompliant stack tests.

The documents submitted pursuant to this condition do require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

Record Keeping and Reporting Requirements [326 IAC 2-7-5(3)] [326 IAC 2-7-19]

C.18 Emission Statement [326 IAC 2-7-5(3)(C)(iii)] [326 IAC 2-7-5(7)] [326 IAC 2-7-19(c)] [326 IAC 2-6] [326 IAC 2-7-19 (e)]

(a) The Permittee shall submit an annual emission statement certified pursuant to the requirements of 326 IAC 2-6, that must be received by July 1 of each year and must comply with the minimum requirements specified in 326 IAC 2-6-4. The annual emission statement shall meet the following requirements and be used for the purpose of a Part 70 fee assessment:

(1) Indicate estimated actual emissions of criteria pollutants from the source;

(2) Indicate estimated actual emissions of other regulated pollutants (as defined by 326 IAC 2-7-1) from the source, for purposes of Part 70 fee assessment.

(b) The annual emission statement covers the twelve (12) consecutive month time period starting January 1 and ending December 31. The annual emission statement must be submitted to:

Indiana Department of Environmental Management
Technical Support and Modeling Section, Office of Air Quality
100 North Senate Avenue, P. O. Box 6015
Indianapolis, Indiana 46206-6015

The emission statement does require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(c) The annual emission statement required by this permit shall be considered timely if the date postmarked on the envelope or certified mail receipt, or affixed by the shipper on the private shipping receipt, is on or before the date it is due. If the document is submitted by any other means, it shall be considered timely if received by IDEM, OAQ, on or before the date it is due.

C.19 General Record Keeping Requirements [326 IAC 2-7-5(3)] [326 IAC 2-7-6]

(a) Records of all required data, reports and support information shall be retained for a period of at least five (5) years from the date of monitoring sample, measurement, report, or application. These records shall be kept at the source location for a minimum of three (3) years. The records may be stored elsewhere for the remaining two (2) years as long as they are available upon request. If the Commissioner makes a request for records to the Permittee, the Permittee shall furnish the records to the Commissioner within a reasonable time.

(b) Unless otherwise specified in this permit, all record keeping requirements not already legally required shall be implemented within ninety (90) days of permit issuance.

C.20 General Reporting Requirements [326 IAC 2-7-5(3)(C)] [326 IAC 2-1.1-11]

(a) The source shall submit the attached Quarterly Deviation and Compliance Monitoring Report or its equivalent. Any deviation from permit requirements, the date(s) of each deviation, the cause of the deviation, and the response steps taken must be reported. This report shall be submitted within thirty (30) days of the end of the reporting period. The Quarterly Deviation and Compliance Monitoring Report shall include the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(b) The report required in (a) of this condition and reports required by conditions in Section D of this permit shall be submitted to:

Indiana Department of Environmental Management
Compliance Data Section, Office of Air Quality
100 North Senate Avenue, P. O. Box 6015
Indianapolis, Indiana 46206-6015

(c) Unless otherwise specified in this permit, any notice, report, or other submission required by this permit shall be considered timely if the date postmarked on the envelope or certified mail receipt, or affixed by the shipper on the private shipping receipt, is on or before the date it is due. If the document is submitted by any other means, it shall be considered timely if received by IDEM, OAQ, on or before the date it is due.

(d) Unless otherwise specified in this permit, all reports required in Section D of this permit shall be submitted within thirty (30) days of the end of the reporting period. All reports do require the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

(e) The first report shall cover the period commencing on the date of issuance of this permit and ending on the last day of the reporting period. Reporting periods are based on calendar years.

Stratospheric Ozone Protection

C.21 Compliance with 40 CFR 82 and 326 IAC 22-1

Pursuant to 40 CFR 82 (Protection of Stratospheric Ozone), Subpart F, except as provided for

motor vehicle air conditioners in Subpart B, the Permittee shall comply with the standards for recycling and emissions reduction:

(a) Persons opening appliances for maintenance, service, repair, or disposal must comply with the required practices pursuant to 40 CFR 82.156.

(b) Equipment used during the maintenance, service, repair, or disposal of appliances must comply with the standards for recycling and recovery equipment pursuant to 40 CFR 82.158.

(c) Persons performing maintenance, service, repair, or disposal of appliances must be certified by an approved technician certification program pursuant to 40 CFR 82.161.

SECTION D.1 FACILITY OPERATION CONDITIONS

Facility Description [326 IAC 2-7-5(15)]:
One (1) medical waste incinerator, identified as INC, installed in 1984, firing natural gas as supplementary fuel, with a maximum charge rate of 1200 pounds of medical waste per hour, rated at 4.0 million British thermal units (MMBtu) per hour, with a wet scrubber as control, and exhausting to Stack 1.
(The information describing the process contained in this facility description box is descriptive information and does not constitute enforceable conditions.)

Emission Limitations and Standards [326 IAC 2-7-5(1)]

D.1.1 General Provisions Relating to NSPS [326 IAC 12-1][40 CFR 60, Subpart A]

The provisions of 40 CFR 60, Subpart A - General Provisions, which are incorporated by reference in 326 IAC 12-1, apply to the facility described in this section except when otherwise specified in 40 CFR 60, Subpart Ce.

D.1.2 Hospital/Medical/Infectious Waste Incinerators [326 IAC 11-6] [40 CFR 60, Subpart Ce]

(a) The medical waste incinerator is subject to 326 IAC 11-6 and 40 CFR 60, Subpart Ce with a compliance date of March 31, 2002.

(b) Pursuant to 326 IAC 11-6 and 40 CFR 60, Subpart Ce, the large medical waste incinerator shall comply with the following emission limits, which are based on 7% oxygen on a dry basis:

(1) Particulate Matter emissions shall not exceed 0.015 grains per dry standard cubic foot;

(2) Carbon Monoxide emissions shall not exceed 40 parts per million by volume;

(3) Dioxins/furans shall not exceed 55 grains per billion dry standard cubic feet total dioxins/furans or 1.0 grains per billion dry standard cubic feet toxic equivalent quantity (TEQ);

(4) Hydrogen chloride emissions shall not exceed 100 parts per million by volume or a 93% reduction;

(5) Sulfur dioxide emissions shall not exceed 55 parts per million by volume;

(6) Nitrogen oxide emissions shall not exceed 250 parts per million by volume;

(7) Lead emissions shall not exceed 0.52 grains per thousand dry standard cubic feet or a 70% reduction;

(8) Cadmium emissions shall not exceed 0.07 grains per thousand dry standard cubic feet or a 65% reduction;

(9) Mercury emissions shall not exceed 0.24 grains per thousand dry standard cubic feet or a 85% reduction.

(10) Discharge into the atmosphere of any gases shall not exceed ten percent (10%)

opacity.

D.1.3 Operator Training and Qualification Requirements [40 CFR 60.34e][40 CFR 60.53c(h)][326 IAC 11-6-5]

The medical waste incinerator shall not operate at any time unless a fully trained and qualified Hospital/Medical/Infectious Waste Incinerator (HMIWI) operator is accessible either at the facility or available within one (1) hour. The following documentation shall be maintained at the facility and an initial review of the information with each HMIWI operator shall be conducted within six (6) months after the effective date of this rule or prior to assumption of responsibilities affecting HMIWI operation, whichever date is later, and annually, thereafter:

(a) Summary of the applicable standards;

(b) Description of basic combustion theory applicable to an HMIWI;

(c) Procedures for receiving, handling, and charging waste;

(d) HMIWI startup, shutdown and malfunction procedures;

(e) Procedures for maintaining proper combustion air supply levels;

(f) Procedures for operating the HMIWI and associated air pollution control systems;

(g) Procedures for responding to periodic malfunction or conditions that may lead to malfunction;

(h) Procedures for monitoring HMIWI emissions;

(i) Reporting and Record keeping;

(j) Procedures for handling ash.

D.1.4 Waste Management Plan [326 IAC 11-6-6] [40 CFR 60.35e]

Pursuant to 326 IAC 11-6-6, the Permittee shall prepare and submit a waste management plan as specified in 40 CFR 60.55c no later than sixty (60) days following the initial performance test.

(a) The Waste Management Plan must identify both the feasibility and the approach to separate certain components of solid waste from the health care waste stream in order to reduce the amount of toxic emissions from incinerated waste.

(b) The Waste Management Plan may include, but is not limited to:

(1) materials such as paper, cardboard, plastics, glass, batteries, or metal recycling; or

(2) purchasing recycled or recycled products.

(c) The Waste Management Plan may include different goals or approaches for different areas or departments of the facility and need not include new waste management goals for every waste stream.

(d) The Waste Management Plan should identify, where possible:

(1) reasonably available additional waste management measures;

(2) taking into account the effectiveness of waste management measures already in place;

(3) the cost of additional measures;

(4) the emission reductions expected to be achieved; and

(5) any other environmental or energy impacts they might have.

(e) The American Hospital Association publication entitled “An Ounce of Prevention: Waste Reduction Strategies” shall be considered in the development of the Waste Management Plan.

(f) Additional requirements:

(1) The Waste Management Plan shall address proper waste segregation.

(2) The Waste Management Plan shall address the management of such waste stream to assure that the Permittee is in compliance with local, state, and federal waste management rules.

(3) The Waste Management Plan shall address proper management of all mercury-containing items.

(4) The Waste Management Plan shall identify all items that could become mercury-containing wastes.

(5) The Permittee shall monitor its waste stream for mercury-containing waste, and shall maintain a list of common mercury-containing items. Common mercury-containing items include, but are not limited to:

(A) Thermometers (silver colored liquid inside);

(B) Thermostats (non-electronic);

(C) Flourescent and other mercury vapor lighting (high intensity discharge - HID, metal halide, high pressure sodium and neon bulbs);

(D) Gauges (barometers, manometers, blood pressure and vacuum gauges with silver colored liquid);

(E) Batteries (mercuric oxide and some alkaline batteries);

(F) Paint (latex manufactures before 1990, and some oil-based paints; check the label);

(G) Thimerosal or merbromine (in some antibacterial products);

(H) Elemental mercury (from labs);

(I) Esophageal dialators; and

(J) Laboratory fixatives.

(6) The Permittee shall include plans to eliminate all mercury-containing items from the waste stream of the incinerator.

(7) The Waste Management Plan shall address the training of all affected staff on proper waste management practices of mercury-containing items and other solid, hazardous and medical waste items.

(8) The Permittee shall have Waste Management Plans for all facilities owned by the Permittee that send waste to this incinerator. Each Waste Management Plan shall comply with the requirements of this condition.

D.1.5 Incinerators [326 IAC 4-2-2]

Pursuant to 326 IAC 4-2-2, the medical waste incinerator, rated at 1200 pounds per hour shall:

(a) Consist of primary and secondary chambers or the equivalent.

(b) Be equipped with a primary burner unless burning wood products.

(c) Comply with 326 IAC 5-1 (Opacity limitations).

(d) Be maintained properly as specified by the manufacturer and approved by IDEM.

(e) Be operated according to the manufacturer's recommendation and only burn waste approved by IDEM.

(f) Comply with other state and/or local rules or ordinances regarding installation and operation of incinerators.

(g) Be operated so that emissions of hazardous materials including, but not limited to, viable pathogenic bacteria, dangerous chemical or gases, or noxious odors are prevented.

(h) Not create a nuisance or a fire hazard.

(i) Not emit particulate matter (PM) in excess of 0.3 pounds per 1000 pounds of dry exhaust gas corrected to fifty percent (50%) excess air.

The operation of the incinerator shall be terminated immediately upon noncompliance with any of the above mentioned requirements.

D.1.6 Carbon Monoxide Emission Limits [326 IAC 9-1-2]

Pursuant to 326 IAC 9-1-2, the waste gas stream from the medical waste incinerator shall be burned in a direct-flame afterburner.

D.1.7 Preventive Maintenance Plan [326 IAC 2-7-5(13)]

A Preventive Maintenance Plan, in accordance with Section B - Preventive Maintenance Plan, of this permit, is required for this facility and any control devices.

Compliance Determination Requirements

D.1.8 Testing Requirements [326 IAC 2-7-6(1),(6)] [326 IAC 2-1.1-11] [326 IAC 11-6-7] [40 CFR 60, Subpart Ce]

(a) Pursuant to 40 CFR 60.56c(c)(2) and (3), annual performance testing to demonstrate compliance with the PM, CO, and HCl emission limits established in Condition D.1.2 shall be performed each year following the initial performance test conducted on March 27, 2002. If all three (3) performance tests over a three (3) consecutive year period indicate compliance with the emission limit for a pollutant (PM, CO, or HCl), the owner or operator may forego a performance test for that pollutant for the subsequent two (2) years. At a minimum, a performance test for PM, CO, and HCl shall be conducted every third year (no more than thirty-six (36) months following the previous performance test). If a performance test conducted every third year indicates compliance with the emission limit for a pollutant (PM, CO, or HCl), the owner or operator may forego a performance test for that pollutant for an additional two (2) years. If any performance test indicates noncompliance with the respective emission limit, a performance test for that pollutant shall be conducted annually until all annual performance tests over a three (3) consecutive year period indicate compliance with the emission limit. The use of the bypass stack during a performance test shall invalidate the performance test.

(b) Pursuant to 40 CFR 60.56c(c)(1), the Permittee shall determine compliance with the opacity limit established in Condition D.1.2 by conducting an annual performance test (no more than twelve (12) months following the previous performance test).

(c) IDEM may require compliance testing at any specific time when necessary to determine if the facility is in compliance. If testing is required by IDEM, compliance shall be determined by a performance test conducted in accordance with Section C - Performance Testing.

D.1.9 Hospital/Medical/Infectious Waste Incinerators [326 IAC 11-6] [40 CFR 60, Subpart Ce]

In order to comply with 326 IAC 11-6 and 40 CFR 60, Subpart Ce, the wet scrubber shall be in operation at all times when the medical waste incinerator is in operation.

Compliance Monitoring Requirements [326 IAC 2-7-6(1)] [326 IAC 2-7-5(1)]

D.1.10 Monitoring [326 IAC 11-6-7] [40 CFR 60.57c]

(a) Pursuant to 326 IAC 11-6-7 and 40 CFR 60.57c, the Permittee shall install, calibrate (to manufacturers specifications), maintain, and operate devices (or establish methods) for monitoring the applicable operating parameters at all times except during periods of startup or shutdown. The following operational parameters for the one (1) Hospital Medical Infectious Waste Incinerator, equipped with a wet scrubber, shall be measured continuously, and recorded at the specified time intervals:

(1) Maximum charge rate, recorded once per hour;

(2) Maximum flue gas temperature, recorded once per minute;

(3) Minimum secondary chamber temperature, recorded once per minute;

(4) Minimum pressure drop across the wet scrubber or minimum horsepower or amperage to the wet scrubber, recorded once per minute;

(5) Minimum scrubber liquor flow rate, recorded once per minute; and

(6) Minimum scrubber liquor pH, recorded once per minute.

(b) The Permittee shall install, calibrate (to manufacturers specifications), maintain, and operate devices (or establish methods) for measuring the use of the bypass stack including date, time, and duration.

(c) The Permittee shall obtain monitoring data at all times during Hospital/Medical/Infectious Waste Incinerator operation except during periods of monitoring equipment malfunction, calibration, or repair. At a minimum, valid monitoring data shall be obtained for 75 percent of the operating hours per day and for 90 percent of the operating days per calendar quarter that the affected facility is combusting hospital waste and/or medical/infectious waste.

(d) The Permittee shall monitor mercury-containing items in the waste stream as required by Condition D.1.4(f)(5).

Record Keeping and Reporting Requirements [326 IAC 2-7-5(3)] [326 IAC 2-7-19]

D.1.11 Record Keeping Requirements

(a) To document compliance with Conditions D.1.2 and D.1.10, the Permittee shall maintain information on site for a period of at least 5 years sufficient to establish compliance with 40 CFR 60.58c(b), based on the control equipment installed.

D.1.12 Reporting Requirements

(a) Pursuant to 326 IAC 11-6-8, 40 CFR 60.38e and 40 CFR 58.58c(c), the Permittee shall submit the following information no later than 60 days following the initial performance test:

(1) The initial performance test data;

(2) The values for the site-specific operating parameters, as applicable [40 CFR 60.56c(d) or (i)]; and

(3) The waste management plan.

(b) Pursuant to 326 IAC 11-6-8, 40 CFR 60.38e and 40 CFR 58.58c(d), as of March 31, 2002, the Permittee must submit an annual report, including the following information:

(1) The values for the site-specific operating parameters, as applicable;

(2) The highest maximum operating parameter and the lowest operating parameter, as applicable, for the year being reported;

(3) The highest maximum operating parameter and the lowest operating parameter as applicable, for the year preceding the year being reported;

(4) Identification of calendar days, times, description and durations of malfunctions; calendar days of emission rates or operating parameters not measured and the reason; and calendar days of emissions rates or operating parameters exceeding the applicable limits; for the year being reported;

(5) Identification of calendar days, times, description and durations of malfunctions; calendar days of emission rates or operating parameters not measured and the reason; and calendar days of emissions rates or operating parameters exceeding the applicable limits; for the preceding year being reported;

(6) If a performance test was conducted during the reporting period, the results of that test;

(7) If no exceedances or malfunctions were reported for the calendar year being reported, a statement that no exceedances occurred during the reporting period; and

(8) Any use of the bypass stack, the duration, reason for malfunction and corrective action taken.

(c) The reports required in (a) and (b) of this condition shall be submitted to the address listed in Section C - General Reporting Requirements.

SECTION D.2 FACILITY OPERATION CONDITIONS

Facility Description [326 IAC 2-7-5(15)]:
Two (2) natural gas fired boilers, firing No. 2 distillate fuel oil as backup, identified as Boiler #1 and Boiler #2, installed in 1971, each rated at 39 MMBtu per hour, and each exhausting to Stack 2.
(The information describing the process contained in this facility description box is descriptive information and does not constitute enforceable conditions.)

Emission Limitations and Standards [326 IAC 2-7-5(1)]

D.2.1 Particulate Matter Limitation (PM) [326 IAC 6-2-3]

Pursuant to 326 IAC 6-2-3 (d) (Particulate emission limitations for sources of indirect heating: emission limitations for facilities specified in 326 IAC 6-2-1 (b)), particulate emissions from all facilities used for indirect heating purposes which were existing and in operation on or before June 8, 1972, shall in no case exceed 0.8 pounds of particulate matter per million British thermal units heat input.

D.2.2 Sulfur Dioxide (SO_2) [326 IAC 7-1.1-1]

Pursuant to 326 IAC 7-1.1 (SO_2 Emissions Limitations): sulfur dioxide emissions from each of the two (2) boilers using No. 2 fuel oil shall be limited to 0.5 pounds per million BTU heat input when using No. 2 fuel oil. This equates to a fuel oil sulfur content limit of less than or equal to 0.5%.

Compliance Determination Requirements

D.2.3 Sulfur Dioxide Emissions and Sulfur Content

Compliance shall be determined utilizing one of the following options.

(a) Pursuant to 326 IAC 3-7-4, the Permittee shall demonstrate that the No. 2 distillate fuel oil sulfur dioxide emissions do not exceed 0.5 pounds per MMBtu by:

(1) Providing vendor analysis of fuel delivered, if accompanied by a certification; or

(2) Analyzing the oil sample to determine the sulfur content of the oil via the procedures in 40 CFR 60, Appendix A, Method 19.

(A) Oil samples may be collected from the fuel tank immediately after the fuel tank is filled and before any oil is combusted; and

(B) If a partially empty fuel tank is refilled, a new sample and analysis would be required upon filling; or

(b) Compliance may also be determined by conducting a stack test for sulfur dioxide emissions from the two (2) boilers, using 40 CFR 60, Appendix A, Method 6 in accordance with the procedures in 326 IAC 3-6.

A determination of noncompliance pursuant to either of the methods specified in (a) or (b) above shall not be refuted by evidence of compliance pursuant to the other method.

Compliance Monitoring Requirements [326 IAC 2-7-6(1)] [326 IAC 2-7-5(1)]

D.2.4 Visible Emissions Notations

(a) Visible emission notations of the boiler stack (Stack 2) exhaust shall be performed once per shift during normal daylight operations when exhausting to the atmosphere when combusting No. 2 distillate fuel. A trained employee shall record whether emissions are normal or abnormal.

(b) For processes operated continuously, "normal" means those conditions prevailing, or expected to prevail, eighty percent (80%) of the time the process is in operation, not counting startup or shut down time.

(c) In the case of batch or discontinuous operations, readings shall be taken during that part of the operation that would normally be expected to cause the greatest emissions.

(d) A trained employee is an employee who has worked at the plant at least one (1) month and has been trained in the appearance and characteristics of normal visible emissions for that specific process.

(e) The Compliance Response Plan for this unit shall contain troubleshooting contingency and response steps for when an abnormal emission is observed. Failure to take response steps in accordance with Section C - Compliance Response Plan - Preparation, Implementation, Records, and Reports, shall be considered a violation of this permit.

Record Keeping and Reporting Requirements [326 IAC 2-7-5(3)] [326 IAC 2-7-19]

D.2.5 Record Keeping Requirements

(a) To document compliance with Conditions D.2.2, the Permittee shall maintain records in accordance with (1) through (6) below.

(1) Calendar dates covered in the compliance determination period;

(2) Actual No. 2 distillate fuel oil and No. 2 distillate fuel oil equivalent usage per month since last compliance determination period and equivalent SO_2 emissions;

(3) A certification, signed by the owner or operator, that the records of the fuel supplier certifications represent all of the fuel combusted during the period; and

If the fuel supplier certification is used to demonstrate compliance the following, as a minimum, shall be maintained:

(4) Fuel supplier certifications.

(5) The name of the fuel supplier; and

(6) A statement from the fuel supplier that certifies the sulfur content of the fuel oil.

The Permittee shall retain records of all recording/monitoring data and support information for a period of five (5) years, or longer if specified elsewhere in this permit, from the date of the monitoring sample, measurement, or report. Support information includes all calibration and maintenance records and all original strip-chart recordings for continuous monitoring instrumentation, and copies of all reports required by this permit.

(b) To document compliance with Condition D.2.4, the Permittee shall maintain records of visible emission notations of the boiler stack (Stack 2) exhaust once per shift.

(c) All records shall be maintained in accordance with Section C - General Record Keeping Requirements, of this permit.

D.2.6 Reporting Requirements

(a) A certification, signed by the responsible official, that certifies all of the fuels combusted during the period. The natural gas-fired boiler certification does require the certification by the "responsible official@ as defined by 326 IAC 2-7-1(34);

(b) The natural gas boiler certification shall be submitted to the address listed in Section C - General Reporting Requirements, of this permit, using the reporting forms located at the end of this permit, or their equivalent, within thirty (30) days after the end of the six (6) month period being reported.

SECTION D.3 FACILITY OPERATION CONDITIONS

Facility Description [326 IAC 2-7-5(15)]:

(a) Degreasing operations that do not exceed 145 gallons per 12 months, except if subject to 326 IAC 20-6.

(b) Emergency diesel generators not exceeding 1600 horsepower.
- (1) Three (3) emergency generators, each rated at 835 HP;
- (2) One (1) emergency generator rated at 1310 HP;
- (3) One (1) emergency generator rated at 1325 HP;

(c) Natural gas turbines or reciprocating engines not exceeding 16,000 horsepower.
- (1) Two (2) emergency natural gas turbine generators, each rated at 450 HP.

(d) Grinding and machining operations controlled with fabric filters, scrubbers, mist collectors, wet collectors and electrostatic precipitators with a design grain loading of less than or equal to 0.03 grains per actual cubic foot and a gas flow rate less than or equal to 4000 actual cubic feet per minute, including the following: deburring; buffing; polishing; abrasive blasting; pneumatic conveying; and woodworking operations.

(The information describing the process contained in this facility description box is descriptive information and does not constitute enforceable conditions.)

Emission Limitations and Standards [326 IAC 2-7-5(1)]

D.3.1 Volatile Organic Compounds (VOC)

Pursuant to 326 IAC 8-3-2 (Cold Cleaner Operations) for cold cleaning operations constructed after January 1, 1980, the owner or operator shall:

(a) Equip the cleaner with a cover;

(b) Equip the cleaner with a facility for draining cleaned parts;

(c) Close the degreaser cover whenever parts are not being handled in the cleaner;

(d) Drain cleaned parts for at least fifteen (15) seconds or until dripping ceases;

(e) Provide a permanent, conspicuous label summarizing the operation requirements;

(f) Store waste solvent only in covered containers and not dispose of waste solvent or transfer it to another party, in such a manner that greater than twenty percent (20%) of the waste solvent (by weight) can evaporate into the atmosphere.

D.3.2 Volatile Organic Compounds (VOC)

(a) Pursuant to 326 IAC 8-3-5(a) (Cold Cleaner Degreaser Operation and Control), the owner or operator of a cold cleaner degreaser without remote solvent reservoirs constructed after July 1, 1990, shall ensure that the following requirements are met:

(1) Equip the degreaser with a cover. The cover must be designed so that it can be easily operated with one (1) hand if:

(A) The solvent volatility is greater than two (2) kiloPascals (fifteen (15) millimeters of mercury or three-tenths (0.3) pounds per square inch) measured at thirty-eight degrees Celsius (38^{O}C) (one hundred degrees Fahrenheit (100^{O}F));

(B) The solvent is agitated; or

(C) The solvent is heated.

(2) Equip the degreaser with a facility for draining cleaned articles. If the solvent volatility is greater than four and three-tenths (4.3) kiloPascals (thirty-two (32) millimeters of mercury or six-tenths (0.6) pounds per square inch) measured at thirty-eight degrees Celsius (38^{O}C) (one hundred degrees Fahrenheit (100^{O}F)), then the drainage facility must be internal such that articles are enclosed under the cover while draining. The drainage facility may be external for applications where an internal type cannot fit into the cleaning system.

(3) Provide a permanent, conspicuous label which lists the operating requirements outlined in subsection (b).

(4) The solvent spray, if used, must be a solid, fluid stream and shall be applied at a pressure which does not cause excessive splashing.

(5) Equip the degreaser with one (1) of the following control devices if the solvent volatility is greater than four and three-tenths (4.3) kiloPascals (thirty-two (32) millimeters of mercury or six-tenths (0.6) pounds per square inch) measured at thirty-eight degrees Celsius (38^{O}C) (one hundred degrees Fahrenheit (100^{O}F)), or if the solvent is heated to a temperature greater than forty-eight and nine-tenths degrees Celsius (48.9^{O}C) (one hundred twenty degrees Fahrenheit (120^{O}F)):

(A) A freeboard that attains a freeboard ratio of seventy-five hundredths (0.75) or greater.

(B) A water cover when solvent is used is insoluble in, and heavier than, water.

(C) Other systems of demonstrated equivalent control such as a refrigerated chiller of carbon adsorption. Such systems shall be submitted to the U.S. EPA as a SIP revision.

(b) Pursuant to 326 IAC 8-3-5(b) (Cold Cleaner Degreaser Operation and Control), the owner or operator of a cold cleaning facility construction of which commenced after July 1, 1990, shall ensure that the following operating requirements are met:

(1) Close the cover whenever articles are not being handled in the degreaser.

(2) Drain cleaned articles for at least fifteen (15) seconds or until dripping ceases.

(3) Store waste solvent only in covered containers and prohibit the disposal or transfer of waste solvent in any manner in which greater than twenty percent (20%) of the waste solvent by weight could evaporate.

D.3.3 Operation Limitation

Pursuant to the definition of emergency generators, operation of the seven (7) emergency generators shall each be limited to 500 hours of operation annually.

D.3.4 Particulate Matter [326 IAC 6-3-2]

Pursuant to 326 IAC 6-3-2(c), the allowable particulate matter emissions rate from any process not already regulated by 326 IAC 6-1 or any New Source Performance Standard, and which has a maximum process weight rate less than 100 pounds per hour shall not exceed 0.551 pounds per hour.

Record Keeping Requirements

D.3.5 Record Keeping Requirements

(a) To document compliance with Condition D.3.3, the Permittee shall maintain records of the following:

(1) The hours of operation of each emergency generator;

(2) Records of the annual fuel usage of each emergency generator.

(b) All records shall be maintained in accordance with Section C - General Record Keeping Requirements of this permit.

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE DATA SECTION

PART 70 OPERATING PERMIT CERTIFICATION

Source Name: Parkview Hospital
Source Address: 2200 Randallia Drive, Fort Wayne, Indiana 46805
Mailing Address: 2200 Randallia Drive, Fort Wayne, Indiana 46805
Part 70 Permit No.: T003-11993-00272

This certification shall be included when submitting monitoring, testing reports/results or other documents as required by this permit.

Please check what document is being certified:

9 Annual Compliance Certification Letter

9 Test Result (specify) _____

9 Report (specify) _____

9 Notification (specify) _____

9 Affidavit (specify) _____

9 Other (specify) _____

I certify that, based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.

Signature:

Printed Name:

Title/Position:

Phone:

Date:

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY

COMPLIANCE BRANCH
100 North Senate Avenue
P.O. Box 6015
Indianapolis, Indiana 46206-6015
Phone: 317-233-5674
Fax: 317-233-5967

PART 70 OPERATING PERMIT
EMERGENCY OCCURRENCE REPORT

Source Name: Parkview Hospital
Source Address: 2200 Randallia Drive, Fort Wayne, Indiana 46805
Mailing Address: 2200 Randallia Drive, Fort Wayne, Indiana 46805
Part 70 Permit No.: T003-11993-00272

This form consists of 2 pages **Page 1 of 2**

9 This is an emergency as defined in 326 IAC 2-7-1(12)

- C The Permittee must notify the Office of Air Quality (OAQ), within four (**4**) business hours (1-800-451-6027 or 317-233-5674, ask for Compliance Section); and
- C The Permittee must submit notice in writing or by facsimile within two (**2**) days (Facsimile Number: 317-233-5967), and follow the other requirements of 326 IAC 2-7-16.

If any of the following are not applicable, mark N/A

Facility/Equipment/Operation:
Control Equipment:
Permit Condition or Operation Limitation in Permit:
Description of the Emergency:

Describe the cause of the Emergency:

If any of the following are not applicable, mark N/A **Page 2 of 2**

Date/Time Emergency started:
Date/Time Emergency was corrected:
Was the facility being properly operated at the time of the emergency? Y N Describe:
Type of Pollutants Emitted: TSP, PM-10, SO_2, VOC, NO_x, CO, Pb, other:
Estimated amount of pollutant(s) emitted during emergency:
Describe the steps taken to mitigate the problem:
Describe the corrective actions/response steps taken:
Describe the measures taken to minimize emissions:
If applicable, describe the reasons why continued operation of the facilities are necessary to prevent imminent injury to persons, severe damage to equipment, substantial loss of capital investment, or loss of product or raw materials of substantial economic value:

Form Completed by: _____

Title / Position: _____

Date: _____

Phone: _____

A certification is not required for this report.

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE DATA SECTION

PART 70 OPERATING PERMIT
SEMI-ANNUAL NATURAL GAS FIRED BOILER CERTIFICATION

Source Name: Parkview Hospital
Source Address: 2200 Randallia Drive, Fort Wayne, Indiana 46805
Mailing Address: 2200 Randallia Drive, Fort Wayne, Indiana 46805
Part 70 Permit No.: T003-11993-00272

9	Natural Gas Only
9	Alternate Fuel burned From:_____ To:_____

I certify that, based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete. Signature:
Printed Name:
Title/Position:
Phone:
Date:

A certification by the responsible official as defined by 326 IAC 2-7-1(34) is required for this report.

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE DATA SECTION

PART 70 OPERATING PERMIT
QUARTERLY DEVIATION AND COMPLIANCE MONITORING REPORT

Source Name: Parkview Hospital
Source Address: 2200 Randallia Drive, Fort Wayne, Indiana 46805
Mailing Address: 2200 Randallia Drive, Fort Wayne, Indiana 46805
Part 70 Permit No.: T003-11993-00272

Months: _____ **to** _____ **Year:** _____

This report is an affirmation that the source has met all the requirements stated in this permit. This report shall be submitted quarterly based on a calendar year. Any deviation from the requirements, the date(s) of each deviation, the probable cause of the deviation, and the response steps taken must be reported. Deviations that are required to be reported by an applicable requirement shall be reported according to the schedule stated in the applicable requirement and do not need to be included in this report. Additional pages may be attached if necessary. If no deviations occurred, please specify in the box marked "No deviations occurred this reporting period".

9 NO DEVIATIONS OCCURRED THIS REPORTING PERIOD.

9 THE FOLLOWING DEVIATIONS OCCURRED THIS REPORTING PERIOD

Permit Requirement (specify permit condition #)	
Date of Deviation:	**Duration of Deviation:**
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	
Permit Requirement (specify permit condition #)	
Date of Deviation:	**Duration of Deviation:**
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	

Permit Requirement (specify permit condition #)	
Date of Deviation:	**Duration of Deviation:**
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	
Permit Requirement (specify permit condition #)	
Date of Deviation:	**Duration of Deviation:**
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	
Permit Requirement (specify permit condition #)	
Date of Deviation:	**Duration of Deviation:**
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	

Form Completed By: _____

Title/Position: _____

Date: _____

Phone: _____

Attach a signed certification to complete this report.

Indiana Department of Environmental Management
Office of Air Quality

Addendum to the
Technical Support Document for a Part 70 Operating Permit

Source Name:	Parkview Hospital
Source Location:	2200 Randallia Drive, Fort Wayne, Indiana 46805
County:	Allen
SIC Code:	8062
Operation Permit No.:	T003-11993-00272
Permit Reviewer:	Linda Quigley/EVP

On December 21, 2001, the Office of Air Quality (OAQ) had a notice published in the Fort Wayne Journal Gazette, Fort Wayne, Indiana, stating that Parkview Hospital had applied for a Part 70 Operating Permit to operate a medical waste incinerator and two (2) boilers at a general medical hospital. The notice also stated that OAQ proposed to issue a permit for this operation and provided information on how the public could review the proposed permit and other documentation. Finally, the notice informed interested parties that there was a period of thirty (30) days to provide comments on whether or not this permit should be issued as proposed.

On January 22, 2002, Mr. Stephen A. Loeschner, a resident of Fort Wayne, Indiana, submitted comments on the proposed Part 70 permit. A summary of the comments and corresponding responses is as follows:

Comment #1

Within the permit (the public notice letter, paragraph 4), reference is made to existing unpermitted emission units and there is a statement, "There are no unpermitted facilities operating during this review process." (Technical Support Document "TSD" p. 1). Were unpermitted facilities operated in 1999 or more recently? What was the nature of the operation? What is the annual total HMIW charge history of the HMIWI including 1992 through the present? What is the history of hydrogen chloride ("HCl") tests and annual estimated emissions for the HMIWI including 1992 through the present? Has Parkview operated the HMlWI without a valid permit during 1992 or more recently at times when possession of a valid permit was required for lawful operation? If so, has the matter been referred to IDEM enforcement? What did IDEM enforcement do?

The Indiana Air Pollution Control Board sent Parkview an acknowledgment of registration November 29, 1983. Was Parkview then authorized to emit HCl with no pollution control equipment tailored to neutralize and or reduce the air emission of acid gases? Was Parkview then authorized to emit more than 10 tons per year ("tpy") HCI? If Parkview has operated the equipment more or less continuously for the recent 18 years, would it have had a legal obligation to alter its operation times and or install pollution control equipment to reduce: HCl, 40 CFR 60.51c *Dioxins/furans,* or 40 CFR 60.56c(b)(9)(ii) Table 2 compounds? I.e., is Parkview adding the wet scrubber pollution control equipment because they are obligated to do it by law/ regulation/ rule, and if so, when did Parkview come under that obligation, and what is that obligation?

Response #1

This source was issued a registration on November 29, 1983 for the two boilers and the incinerator. Since an approval was issued for these units, they are considered permitted emission units. The source applied for a part 70 permit on time per 326 IAC 11-6-3, which applies to the medical waste incinerator. There are no other emission units at the source that would have required a permit, therefore, there have been no unpermitted emission units operating at the source. This is the reason that the statement "There are no unpermitted facilities operating during this review process" was included in the Technical Support Document. The statement in the public notice letter that this "proposed Part 70 permit contains provisions intended to satisfy the requirements of the construction permit rules for certain existing unpermitted emission unit(s)" was included in error.

Parkview Hospital operates a 1,200 pound per hour incinerator to dispose of hospital/medical/infectious waste materials (HMIW). The unit operates 24 hours per day, 7 days per week, with limited down time for maintenance. The source estimates that only 10% of the waste incinerated is infectious. When this source was originally permitted, the flue gas discharge from the incinerator was ducted to a waste heat boiler which generates approximately 4200 pounds per hour of saturated steam at nominal working pressure. The previous emission controls, with HCl being one of the controlled pollutants, consisted of supplemental gas firing on both the primary and secondary chambers. Therefore, the incinerator has been operated with control to reduce HCl emissions.

Parkview Hospital is supplementing the original emission controls by installing a sub-cooled wet scrubber system on the incinerator gas stream downstream of the existing waste heat boiler. The scrubber will ensure that the incinerator is in compliance with the emission limits outlined in 40 CFR Part 60, Subpart Ce, Table 1 and 326 IAC 11-6. Pursuant to these rules, the source must be in compliance no later than March 31, 2002. The OAQ inspector for this source has confirmed that the source was in compliance with 326 IAC 11-6 and 40 CFR Part 60, Subpart Ce by March 31, 2002. The scrubber system is installed and the incinerator with the scrubber was stack tested on March 27, 2002 and was found to be in compliance.

Since the initial stack test that was required to demonstrate compliance with 326 IAC 11-6 and 40 CFR Part 60, Subpart Ce was performed on March 27, 2002 and indicated that the source was in compliance before March 31, 2002, the requirement to perform an initial stack test no later than March 31, 2002 is no longer necessary. Therefore, condition D.1.8 was revised as follows:

D.1.8 Testing Requirements [326 IAC 2-7-6(1),(6)] [326 IAC 2-1.1-11] [326 IAC 11-6-7] [40 CFR 60, Subpart Ce]

~~(a) Pursuant to 326 IAC 11-6 and 40 CFR 60, Subpart Ce, an initial performance test to demonstrate compliance with Condition D.1.2 must be conducted no later than March 31, 2002. Compliance shall be determined according to 326 IAC 3-6 concerning source sampling procedures and 40 CFR 60, Subpart Ce, Section 60.56c, excluding the fugitive emissions testing requirements under Section 60.56c(b)(12) and 60.56c(c)(3).~~

~~(b)~~**(a)** Pursuant to 40 CFR 60.56c(c)(2) and (3), annual performance testing to demonstrate compliance with the PM, CO, and HCl emission limits established in Condition D.1.2 shall be performed each year following the initial performance test **conducted on March 27, 2002**. If all three (3) performance tests over a three (3) consecutive year period indicate compliance with the emission limit for a pollutant (PM, CO, or HCl), the owner or operator may forego a performance test for that pollutant for the subsequent two (2) years. At a minimum, a performance test for PM, CO, and HCl shall be conducted every third year (no more than thirty-six (36) months following the previous performance test). If a performance test conducted every third year indicates compliance with the emission limit for a pollutant (PM, CO, or HCl), the owner or operator may forego a performance test for that pollutant for an additional two (2) years. If any performance test indicates noncompliance with the respective emission limit, a performance test for that pollutant shall be conducted annually until all annual performance tests over a three (3) consecutive year period indicate compliance with the emission limit. The use of the bypass stack during a performance test shall invalidate the performance test.

~~(c)~~**(b)** Pursuant to 40 CFR 60.56c(c)(1), the Permittee shall determine compliance with the opacity limit established in Condition D.1.2 by conducting an annual performance test (no more than twelve (12) months following the previous performance test).

~~(d)~~**(c)** IDEM may require compliance testing at any specific time when necessary to determine if the facility is in compliance. If testing is required by IDEM, compliance shall be determined by a performance test conducted in accordance with Section C - Performance Testing.

Also, since the wet scrubber has been installed and the OAQ has determined that the source is in compliance with 326 IAC 11-6 and 40 CFR Part 60, Subpart Ce, based on the initial stack testing, condition D.1.9 and condition D.1.12 were removed in their entirety. Condition D.1.10, now D.1.9, condition D.1.13, now D.1.11, and condition D.1.14, now D.1.12, were also revised accordingly.

~~D.1.9 Compliance Date [326 IAC 11-6-9] [40 CFR 60.39c]~~

~~Pursuant to 326 IAC 11-6-9, the source shall install the necessary air pollution control equipment and be in compliance with all provisions of this rule no later than March 31, 2002, provided the following measurable and enforceable incremental steps of progress are taken:~~

~~(a) Submit a final control plan no later than June 30, 1999;~~

~~(b) Award contracts for emissions control systems or for process modifications, or issuance of orders for the purchase of component parts to accomplish emission control or process modifications no later than March 31, 2000;~~

~~(c) Initiate on-site construction or installation of emission control equipment or process change no later than March 31, 2001;~~

~~(d) Complete on-site construction or installation of emission control equipment or process change no later than September 30, 2001;~~

~~(e) Be in final compliance no later than March 31, 2002; and~~

~~(f) The source shall be in compliance with the operator training and qualification requirements~~

~~by March 11, 2000.~~

D.1.1~~0~~**9** Hospital/Medical/Infectious Waste Incinerators [326 IAC 11-6] [40 CFR 60, Subpart Ce]

In order to comply with 326 IAC 11-6 and 40 CFR 60, Subpart Ce, the wet scrubber shall be in operation at all times when the medical waste incinerator is in operation ~~on and after March 31, 2002~~.

~~D.1.12 Visible Emissions Notations~~

~~(a) Visible emission notations of the incinerator/scrubber stack(s) exhaust shall be performed once per shift during normal daylight operations until the final compliance date of March 31, 2002, or upon complying with the monitoring requirements of 326 IAC 11-6 and 40 CFR 60 Subpart Ce specified in Condition D.1.11, whichever is earlier, when exhausting to the atmosphere. After March 31, 2002, the monitoring requirements of 326 IAC 11-6 and 40 CFR 60 Subpart Ce will make these visible emissions notations unnecessary. A trained employee shall record whether emissions are normal or abnormal.~~

~~(b) For processes operated continuously, "normal" means those conditions prevailing, or expected to prevail, eighty percent (80%) of the time the process is in operation, not counting startup or shut down time.~~

~~(c) In the case of batch or discontinuous operations, readings shall be taken during that part of the operation that would normally be expected to cause the greatest emissions.~~

~~(d) A trained employee is an employee who has worked at the plant at least one (1) month and has been trained in the appearance and characteristics of normal visible emissions for that specific process.~~

~~(e) The Compliance Response Plan for this unit shall contain troubleshooting contingency and response steps for when an abnormal emission is observed. Failure to take response steps in accordance with Section C - Compliance Response Plan - Failure to Take Response Steps, shall be considered a violation of this permit.~~

D.1.1~~3~~**1** Record Keeping Requirements

(a) To document compliance with Conditions D.1.2 and D.1.1~~1~~**0**, the Permittee shall maintain information on site for a period of at least 5 years sufficient to establish compliance with 40 CFR 60.58c(b), based on the control equipment installed.

~~(b) To document compliance with Condition D.1.12, the Permittee shall maintain records of visible emission notations of the incinerator stack exhaust once per shift until the final compliance date of March 31, 2002.~~

D.1.1~~4~~**2** Reporting Requirements

(a) Pursuant to 326 IAC 11-6-8, 40 CFR 60.38e and 40 CFR 58.58c(c), the Permittee shall submit the following information no later than 60 days following the initial performance test:

(1) The initial performance test data;

(2) The values for the site-specific operating parameters, as applicable [40 CFR

60.56c(d) or (i)]; and

(3) The waste management plan.

(b) Pursuant to 326 IAC 11-6-8, 40 CFR 60.38e and 40 CFR 58.58c(d), ~~upon~~ **as of** March 31, 2002, the Permittee must submit an annual report, including the following information:

(1) The values for the site-specific operating parameters, as applicable;

(2) The highest maximum operating parameter and the lowest operating parameter, as applicable, for the year being reported;

(3) The highest maximum operating parameter and the lowest operating parameter as applicable, for the year preceding the year being reported;

(4) Identification of calendar days, times, description and durations of malfunctions; calendar days of emission rates or operating parameters not measured and the reason; and calendar days of emissions rates or operating parameters exceeding the applicable limits; for the year being reported;

(5) Identification of calendar days, times, description and durations of malfunctions; calendar days of emission rates or operating parameters not measured and the reason; and calendar days of emissions rates or operating parameters exceeding the applicable limits; for the preceding year being reported;

(6) If a performance test was conducted during the reporting period, the results of that test;

(7) If no exceedances or malfunctions were reported for the calendar year being reported, a statement that no exceedances occurred during the reporting period; and

(8) Any use of the bypass stack, the duration, reason for malfunction and corrective action taken.

(c) The reports required in (a) and (b) of this condition shall be submitted to the address listed in Section C - General Reporting Requirements.

Comment #2

40 CFR 60 Subparts Ec and Ce seem to have been created as a result of 42 USC 7411 and or 42 USC 7429 instruction. While 42 USC 7412 is mentioned within § 7411 and § 7429, there is nothing substantial that indicates a superiority of any of the three over any of the other two, nor is there anything substantial to indicate that Subparts Ec and Ce are superior to § 7412. Thus there is a reasonable belief that Parkview's § 7412(b) HCl Hazardous Air Pollutant ("HAP") emission is subject to the § 7412(a)(1) 10 tpy threshold reaffirmed by 40 CFR 70.2 *Major source* (1)(i).

Parkview and DEM may allege in part that less than 10 tpy HCI will be emitted from the reconstructed HMlWI based on U.S. Environmental Protection Agency AP-42 Emission Factors Table 2.3-3 (Reformatted January 1995, factor presumed published July 1993, "EPA, AP-42") which gives rise to an uncontrolled

potential to emit of 88 tpy coupled with the 40 CFR 60.33e(a) Table 1 93% HCl reduction from control equipment giving a limited potential to emit of 6.2 tpy.

That claim is faulty for it relies on a *"C"* rated, 3rd level quality, AP-42 factor that is more than 8 years old. The health-care industry is in considerable flux. It may very well be that the chlorine percentage of HMIW charge mass has increased through the years as a result of increased discardable polyvinyl chloride and other chlorine containing materials in the waste stream. That claim is also faulty because the 93% HCl reduction from control equipment is an option and it is not an obligation.

It is an abuse of discretion to cite an 8-year old *"C"* rated 3rd level quality factor as a basis for believing that the net HCl emission will be less than 10 tpy. It is an abuse of discretion to cite a pollution control equipment efficiency as a basis for believing that the net HCI emission will be less than 10 tpy when said efficiency is not required by law, regulation, rule, or permit.

There is an additional option granted to Parkview, in that 11993 D.1.2(b)(4) has the word "or" taken from the HCl line of 40 CFR 60.30e *et seq.* Table 1 which provides a 100 part per million by volume HCl [on a dry basis corrected to 7% O_2] ("ppmvd") optional "limit".

Nowhere within the 11993 package is there a revelation of the stack height, or a *clear* characterization of the stack flow and chemistry that would enable an accurate computation of if there was 100 ppmvd HCl @ 7% O_2 in the stack flow, what the corresponding HCl tpy mass would be. What is the stack height?

None the less, there is some data that may be drawn from on p.10 of Appendix A to the 11993 TSD: 1) a calculated 7161.55 “dscfm” (dry standard cubic feet per minute) composite stack gas flow rate, 2) an indication that the composite stack gas has approximately 50% excess air (O_2 volume in dry air being about 21%, this gives rise to an O_2 volume in dry composite stack gas being approximately 7%.), 3) an assumption that composite stack gas has a molecular weight of 29, and 4) a calculated 13.565 [ds]cf per pound mass of composite stack gas. Assembling those elements with 100 ppmvd molecular weight 36.46 HCI @ 7% O_2 yields:

7161.55 x 60 x 36.46/29 x 100/ 1E6 / 13.565 x 8,768 / 2,000 = 17.45 tpy HCl

What is the specific maximum annual HCl mass emission that DEM believes the 11993 draft constrains Parkview to? If it is unbounded, then so state. What is the specific maximum hourly annual HCI mass emission that DEM believes the 11993 draft constrains Parkview to? If it is unbounded, then so state.

It appears that nowhere within the 11993 permit is there anything that serves to limit the HCI emission to less than 10 tpy or to less than 2.281 pph over any averaging period.

If the issued permit has no HCI annual or shorter time mass limit, then the issued permit will be directly contumacious of 40 CFR 70.2 *Potential to emit* requirement for a limit and a mechanism by which the Administrator may enforce it.

It is entirely feasible for the Parkview 1,200 pph HMIWI to be in full compliance with 40 CFR 60.30e *et seq.* and to emit more than 17 tpy of HCl. If Parkview wishes to be 40 CFR 70.2... synthetic minor for HCl, then DEM must impose HCl pph limits and compliance tests to demonstrate on a more or less continuous basis that the 42 USC 7412(a)(1) threshold has not been exceeded. All benefit of doubt in re measurement uncertainty reasonably belongs to the People. If, for example, a calculated mass stack flow of 2.000 pph

HCl based on the maximum charge is thought to actually represent an emission of between 1.770 and 2.230 pph, then the limit would properly be set at 2.045 pph if there was a continuous HCl monitor in-place. If something much less than continuous monitoring was employed, for example quarterly testing, then the limit must be reduced more to account for the statistical uncertainty of excursions in the unmeasured times. That may properly reduce the permitted limit to perhaps 1.350 pph HCl.

It would appear that the author of the 11993 draft misread the AP-42 Table 2.3-3 "High Energy [Wet] Scrubber" 1.39E-1 pounds HCl per ton HMIW charge factor as "1.139E-1" (p.7 Appendix A of 11993 TSD) leading to their erroneous 0.30 tpy HCI computation, rather than: 0.139 x 1,200 /2,000 x 8,768/2,000 = 0.366 tpy HCl.

It would be entirely appropriate for DEM to impose 0.0834 pph (0.366 tpy) HCI (AP-42 Table 2.3-3, July 1993) or 0.0685 pph (0.30 tpy) HCI (p. 7 Appendix A of TSD) limits since those are the values presented to the People via the 11993 draft.

Where there are mass-based law/regulatory thresholds, 40 CFR 70 permits must make clear what mass quantity of pollutants may be emitted in what units of time and what mass quantity of pollutants may be emitted for what waste charge mass is processed. 11993 is abysmal in addressing the most dominant HAP. Quarterly HCl mass per time and HCl mass per waste charge mass tests, coupled with monthly charge mass emission factor calculations based on daily logs of charge mass should be considered a minimal approach to demonstrating compliance on a more or less continuous basis.

Response #2

Parkview Hospital has not requested that this source be a synthetic minor source for HCl. Therefore, no limits are in the draft Part 70 permit to specifically limit HCl emissions to less than 10 tons per year. Emissions of HCl from the medical waste incinerator are only limited to the levels required in 40 CFR 60.33e, Table 1 and the levels required in 326 IAC 11-6. Although it is stated in the TSD that HCl emissions after control are less than 10 tons per year from the incinerator, this is not a federally enforceable emission limit and is based on the minimum required control efficiency of the scrubber. Since the source has retrofitted the incinerator with a wet scrubber to comply with 326 IAC 11-6 and 40 CFR Part 60, Subpart Ce, controlled HCl emissions were stated to be less than 10 tons per year. This statement was not included in the Part 70 permit and is not intended to serve as a limit on HCl emissions of less than 10 tons per year because there is no need to limit HCl emissions to less than 10 tons per year. To demonstrate compliance with the applicable HCl, PM and CO emission limits pursuant to 326 IAC 11-6 and 40 CFR Part 60, Subpart Ce, the source was required to perform an initial test on the incinerator no later than March 31, 2002 and is required to perform testing each year following the initial performance test as stated in condition D.1.8 of the Part 70 permit. This source performed an initial test on the incinerator with the wet scrubber in place on March 27, 2002 and was found by the OAQ to be in compliance with 326 IAC 11-6 and 40 CFR Part 60, Subpart Ce.

To clarify that the limits specified in condition D.1.2 of the Part 70 permit are on a dry basis corrected to 7% oxygen in the stack flow, the condition is revised as follows:

D.1.2 Hospital/Medical/Infectious Waste Incinerators [326 IAC 11-6] [40 CFR 60, Subpart Ce]

(a) The medical waste incinerator is subject to 326 IAC 11-6 and 40 CFR 60, Subpart Ce with a compliance date of March 31, 2002.

(b) Pursuant to 326 IAC 11-6 and 40 CFR 60, Subpart Ce, the large medical waste incinerator shall comply with the following emission limits**, which are based on 7% oxygen on a dry basis**:

(1) Particulate Matter emissions shall not exceed 0.015 grains per dry standard cubic foot;

(2) Carbon Monoxide emissions shall not exceed 40 parts per million by volume;

(3) Dioxins/furans shall not exceed 55 grains per billion dry standard cubic feet total dioxins/furans or 1.0 grains per billion dry standard cubic feet toxic equivalent quantity (TEQ);

(4) Hydrogen chloride emissions shall not exceed 100 parts per million by volume or a 93% reduction;

(5) Sulfur dioxide emissions shall not exceed 55 parts per million by volume;

(6) Nitrogen oxide emissions shall not exceed 250 parts per million by volume;

(7) Lead emissions shall not exceed 0.52 grains per thousand dry standard cubic feet or a 70% reduction;

(8) Cadmium emissions shall not exceed 0.07 grains per thousand dry standard cubic feet or a 65% reduction;

(9) Mercury emissions shall not exceed 0.24 grains per thousand dry standard cubic feet or a 85% reduction.

(10) Discharge into the atmosphere of any gases shall not exceed ten percent (10%) opacity.

The emission factor for controlled HCl emissions from the medical waste incinerator, on page 7 of Appendix A, based on AP-42, Table 2.3-3, has been corrected to 1.39E-01 lb/ton. Controlled emissions based on the emission factor are now 0.37 tons per year (0.139 lb/ton x (1200 lbs/hr maximum throughput x 1 ton/2000 lbs) x 8,760 hrs/yr x 1 ton/2000 lbs). This change does not affect compliance with the applicable HCl limits pursuant to 326 IAC 11-6-4 and 40 CFR 60, Subpart Ce or any applicable compliance monitoring requirements.

The OAQ prefers that the Technical Support Document (TSD) reflect the permit that was on public notice. Changes to the permit or technical support material that occur after the public notice are documented in this Addendum to the Technical Support Document. This accomplishes the desired result of ensuring that these types of concerns are documented and part of the record regarding this permit decision. To provide information on the parameters of the stacks present at this source, a table is now added as follows:

Stack Summary

Stack ID	Operation	Height (feet)	Diameter (feet)	Flow Rate (acfm)	Temperature (^{0}F)

1	Incinerator/Wet Scrubber	40.0	1.6	7,500	95
2	Boilers #1 and #2	78.75	5.0	12,600	300

Comment #3

In the EPA 21 August 2001 Sims Roy combustion turbine ("CT") Hazardous Air Pollutant memo, he mentions that roughly two-thirds of the total HAP emission mass from natural gas fueled CT's is formaldehyde ("H_2CO") (third para. under Oxidation Catalyst Systems heading).

AP-42 para. 3.1.3.5 (April 2000) mentions that roughly two-thirds of the total HAP emission mass from natural gas fueled CT's is H_2CO.

DEM seems to have no shame in misleading the People, as it wrote in page 19 of the Addendum to the Cogentrix Lawrence County PSD Permit 093-12432-00021 ("12432") TSD 5 October 2001 in response to my 5 June 2001 comment: "[F]ormaldehyde is not the largest HAP."

It is repugnant that 12 men walked on the moon decades ago and yet the People cannot get a simple accurate answer in reference to combustion products today.

One chemical reaction attribute should be evident by intuition. It is flat out not possible for the components of the air and the natural gas fuel, when combusted in a CT, or in a boiler burner, such as Parkview 's, to reassemble (or to be present and pass through un-reacted) such that more mixed isomer (or perhaps the n-hexane isomer only?) 6-carbon hexane (containing no oxygen) of molecular weight 86 is emitted than 1-carbon H_2CO of molecular weight 30.

Yet DEM, in the HAP table of p. 3 of Appendix A to the 11993 TSD indicates a mass ratio of 0.615 / 0.0256 - a domination by hexane by a mass factor of 24.

If DEM does not have one or more peer-reviewed chemical tests of natural gas combustion effluent from a boiler, where the mass of H_2CO was found to be less than that of another HAP at the same source at the same time at a time where normal operation was claimed; or if DEM does not have one or more peer reviewed chemical tests of natural gas combustion effluent from a boiler, where a greater mass of mixed hexane isomers than acetaldehyde was found at the same source at the same time at a time where normal operation was claimed; then, the time is now for DEM to renounce its hexane allegations.

In the Addendum to the 11993 TSD, please purge all references indicating that hexane is anywhere near H_2CO as natural gas combustion effluent, and completely rework the 11993 package to be diligent in re H_2CO and acetaldehyde. I am pleased that DEM SIGECO Posey County PSD Permit drafts 029-12029-00010 and 029-14021 -00010 seem to not mention hexane at all. But I am considerably aggrieved that it has reappeared in 11993 following my hexane comments in re 12432 and General Motors Allen County PSD Permit 003-12830-00036 2 January 2001.

Response #3

When there is no site specific test data available, the OAQ must rely on the most currently available emissions data when calculating emissions. The emission factors used to calculate emissions from the combustion of natural gas in the two (2) boilers at this source correspond to the most recent AP-42 emissions information. Section 1.4 of AP-42 for Natural Gas combustion was revised in March, 1998 to

update all emission factors based on 482 data points taken from 151 source tests. Many new emission factors were added for speciated organic compounds, including HAPs. The emission factor for formaldehyde, which had a “C” emission factor rating, was revised from 0.155 lb/million cubic feet to 0.075 lb/million standard cubic feet and the emission factor rating was upgraded to “B”. Also, an emission factor of 1.8 lb/million cubic feet for hexane was added. However, the emission factor rating for the hexane emission factor is “E”, indicating a poor rating. Although the emission factor for hexane is poor, it is a conservatively high emission factor, being much greater than the emission factor for formaldehyde, believed in most cases to be the HAP actually emitted in the greatest quantity. Therefore, since the emission factor for formaldehyde has an above-average rating of “B” and conservative estimates were used for other HAPs with poor emission factor ratings, the potential HAP emission calculations for natural gas combustion are believed to represent the worst-case emissions of each HAP. From a regulatory standpoint, the potential HAP emissions do not trigger applicability of any additional requirements, therefore, the emission calculations in Appendix A will remain unchanged.

Comment #4

It would appear that in order to persuade existing polluters (or perhaps to encourage them to not sue as a "taking" matter) to reduce their emissions by installing pollution control equipment on existing emissions units, some concessions were made. Specifically 40 CFR 60.50c(h) "granted" a seven times HCl gift to retrofitters (100 ppmvd v. 15 ppmvd and 93% reduction v. 99% reduction). Has that matter been tested in a court?

The idea that Parkview is willing (or obligated) to upgrade their HMIWI in the year 2002 to something that is seven (7) times dirtier than a new unit on which construction was commenced after 20 June 1996 should be something for a federal jury to examine.

40 CFR 60 Subparts Ec and Ce were promulgated in 62 FR 48348 (15 September 1997) together with summary background text. Few things can be more cruel than coupling the 62 FR 48351 text, "As described in detail below, section 129, like section 112, of the CAA instructs the Agency to set performance standards that challenge industry to meet or exceed the pollution control standards established by better controlled similar facilities." with a gift to Parkview that it not be "challenged."

Response #4

The incinerator at this source is subject to the requirements of 326 IAC 11-6 and 40 CFR Part 60, Subpart Ce because it was constructed prior to June 20, 1996. As stated in 62 FR 48348, “sources are required to achieve emission levels reflecting the maximum degree of reduction in emissions of air pollutants that the Administrator has determined is achievable, taking into consideration the cost of achieving such emission reduction, any nonair-quality health and environmental impacts, and energy requirements.” The standards for new medical waste incinerators were proposed in 1995. A notice was then issued in June, 1996 which announced the availability of new information, reviewed EPA’s assessment of the new information, provided EPA’s inclination as to how the new information might change the final standards and guidelines, and solicited comments on EPA’s assessments and inclinations. The EPA agrees that the June 1996 notice contained significant changes compared with the 1995 proposal, making most of the analysis and conclusions from the 1995 proposal irrelevant. Upon further consideration the EPA considered the June

1996 notice to have been a re-proposal. Therefore, units who commenced construction on or before June 20, 1996 are considered existing sources subject to the emission guidelines under 40 CFR Part 60, Subpart Ce. For most sources, the existing medical waste incinerators as defined above would have to be replaced or reconstructed to meet the requirements pursuant to 40 CFR Part 60, Subpart Ec. This would be prohibitively expensive for the majority of sources with existing medical waste incinerators, therefore, these units are subject to the emission guidelines under 40 CFR Part 60, Subpart Ce.

As stated in 62 FR 48349, under section 307(b)(1) of the Clean Air Act, judicial review of the actions taken by the September 15, 1997 notice in the Federal Register of promulgation of 40 CFR 60, Subparts Ce and Ec was available by filing a petition for review in the U.S. Court of Appeals for the District of Columbia Circuit within 60 days of the September 15, 1997 publication of this rule. Under section 307(b)(2) of the Clean Air Act, the requirements that are in the September 15, 1997 notice may not be challenged later in the civil or criminal proceedings brought by the EPA to enforce these requirements. Therefore, there was ample opportunity for these requirements to be reviewed in court.

Comment #5

The 11993 permit allows more than 10 tpy HCl. The "limit" imposed by the 11993 permit is not federally enforceable first because there is no annual limit on the mass of the emission, and secondly because an inspector looking at a log book and an 11-month-old chemical test result has no clue as to if the facility operated within an emissions rate limit on a more or less continuous basis. The D.1.8(b) 36-month test interval provision is sin personified. What if there would be a test failure then? Would Parkview be threatened with a $27 million fine for having violated at the rate of $25,000 per day? I think not. Nothing less than quarterly tests is acceptable. The patronizing background text 62 FR 48360 (15 September 1997) *D. Testing...* gives no costs of HCl stack tests. Clearly this is something that must be demanded at least quarterly with no skip to have some idea of compliance.

Response #5

To consider comments on the 1995 proposal of the emission standards and guidelines in Subparts Ec and Ce, respectively, regarding the frequency of emission testing and the proposed inspection and monitoring requirements, EPA presented a matrix of testing and monitoring options and their associated costs in the 1996 re-proposal (61 FR 31749). The EPA noted that almost all of the emission testing and monitoring options under consideration cost more than the incinerator or emission control system that would be installed to meet the emission limits in the regulations. Consequently, the Agency stated that it was inclined to include monitoring of operating parameters and testing (instead of CEMS) in the final regulations to minimize costs. With regard to specific air pollution control device (APCD) operating parameters to be monitored, the Agency stated that it was inclined to require monitoring of the same parameters as outlined in the 1995 proposal for dry scrubbers, and the following for wet scrubbers: Scrubber exit temperature, scrubber liquor pH, scrubber liquor flow rate, and energy input to the scrubber (e.g., pressure drop or horsepower). The EPA also stated in the 1996 re-proposal that it was inclined to require initial and repeat stack testing (annual/skip testing) where the regulations are based on good combustion and wet and/or dry scrubbing systems. With the annual/skip testing requirement, emission tests would be required annually for the first 3 years. If these tests show that the facility was in compliance each of these 3 years, then subsequent testing would be done every third year. Under the inclinations presented in the 1996 re-proposal, annual or skip emission testing would only require emission testing of a few key or critical pollutants (i.e., only those necessary to gain a good indication that the air pollution control system is operating properly). In the Part 70 permit for Parkview, annual testing is required for PM, CO, and HCl. As stated in the rule, if all three performance tests over a three (3) consecutive year period indicate compliance with the emission limit for a pollutant, then the testing frequency can be extended to a thirty-six (36) month period.

As stated in 61 FR 31748, “In developing a regulation based on the performance of a particular technology, the level of performance demanded by the regulation must be consistent with the level of performance that technology can achieve. The period of time over which emissions are measured and then averaged to determine compliance with the regulation, therefore, must correspond to the period of time over which emission levels were measured and averaged in determining the emission limits included in the regulation. If this is not the case, a regulation could include emission limits that a technology can achieve if emissions are averaged over a relatively long period of time, but not if emissions are averaged over a much shorter period of time. For this reason, the proposed regulation required emission testing to determine compliance by averaging the results of three, 4-hour test runs, consistent with the procedures followed in gathering the emission data used to establish the emission limits included in the regulation. Many comments were received regarding this proposed requirement to determine compliance using three, 4-hour test runs. These commenters noted that a 4-hour test run was much longer than the more conventional test run of about 1-hour; additionally, many hospitals and healthcare facilities would normally not have sufficient waste on hand

to accommodate three, 4-hour test runs. Finally, several commenters stated that the proposed emission testing requirements would substantially increase the costs associated with emission testing. Consequently, these commenters urged EPA to revise the emission testing requirements and adopt the more conventional approach of relying on test runs of about an hour in length. As mentioned earlier, more than two dozen test reports were submitted to EPA following the proposal, and these test reports now form the basis for revised conclusions regarding the performance capabilities of technology and the emission limits these technologies can achieve. The EPA test methods were used to perform the emission testing summarized in these reports. These methods include procedures that require the collection of a sufficient sample to accurately measure emission levels. For most air pollutants, this sample generally corresponds to a test run of about an hour. The revised conclusions discussed earlier, therefore, regarding the performance capabilities of emission control technologies and the emission limits these technologies can achieve, are based (for the most part) on emission test data generated by averaging the results of three test runs of about an hour each (i.e., a 3-hour test)." For this reason, the testing requirements in 40 CFR 60.56c require that the EPA test methods listed in paragraph (b) be followed when performing any emission testing required to determine compliance with the regulations. This requirement will ensure that compliance testing follows the same procedures used to generate the emission data upon which the emission limits in the final regulation were based. In most cases, three test runs of about an hour each would be necessary to determine compliance with the final regulations.

The specific values for operating parameters are initially chosen by the owner or operator and are subsequently established during the initial performance test demonstrating compliance with the emission limits. After the performance test, monitoring of the operating parameters is a reliable way to indicate, on a continuous basis, whether the source is operating in compliance. Operation outside the bounds of an established operating parameter is a violation of an operating parameter limit. In addition, operation outside the bounds of one or more parameter limits may constitute a violation of a specific emission limit. This latter provision was included in the 1995 proposed regulations and is retained in the final regulations. The owner or operator has the flexibility to choose the values for the operating parameters and may conduct repeated performance tests to "fine tune" the operating parameter limits, if desired.

Comment #6

Clearly, congressional intent as expressed in 42 USC 7412 and 42 USC 7429 was not and is not to permit "the [EPA] Administrator" to allow an unlimited quantity emission of HCl from a source, yet this is precisely the effect of the word "or" in 11993 D.1.2(b)(4) taken from the HCl line of 40 CFR 60.30e *et seq.* Table 1 and the HCl line of 40 CFR 60.50c *et seq.* Table 1. The proposed permit if issued would authorize construction, reconstruction, retrofit, etc. Clearly, the effort is sufficiently substantial that, as a minimum, all of 40 CFR 60.50c *et seq.* requirements must be imposed. That includes the 40 CFR 60.50e *et seq.* Table 1 limits of 99% removal of HCI, not the 93% in the 11993 draft and 15 ppmvd maximum HCI, not the 100 ppmvd maximum in the 11993 draft.

As an absolute minimal edit of the 11993 draft prior to issuance, these terms must be added to the HMlWI portions:

1) four HCI stack tests per 365-day rolling period, with no more than 110 days between consecutive tests;

2) a 99% HCI removal efficiency or a 15 ppmvd concentration;

3) HCI emission mass accounted daily and cumulating to less than 10 tons per 365-day rolling period;

4) notice that a failure of 1) will constitute a presumptive number of violations corresponding to the number of days of testing tardiness and that the stock approximate $25,000 fine per violation may be applied; and

5) notice that a failure of 2) will constitute a presumptive number of violations corresponding to the number of days between the failing and the prior passing test, and that the stock approximate $25,000 fine per violation may be applied.

Response #6

Because the medical waste incinerator at this source was constructed prior to June 20, 1996, it is not subject to the requirements of 40 CFR 60.50c through 60.58c, Subpart Ec. For the reasons noted in response #4 above, existing medical waste incinerators constructed prior to June 20, 1996 (the date that the rule was re-proposed) are subject to the emission guidelines under 40 CFR 60.30e through 60.39e, Subpart Ce. Although the incinerator was retrofitted with a wet scrubber to comply with 326 IAC 11-6 and 40 CFR Part 60, Subpart Ce, pursuant to 326 IAC 11-6-1(c) and 40 CFR 60.32e(h), any physical or operational changes made to an existing HMIWI solely for the purpose of complying with emission guidelines under 40 CFR 60, Subpart Ce and emission limits under 326 IAC 11-6 are not considered modifications and do not result in existing HMIWI's becoming subject to the provisions under 40 CFR 60, Subpart Ec. Therefore, the incinerator is not subject to the 99% HCl removal efficiency or the 15 ppmvd HCl concentration pursuant to 40 CFR 60, Subpart Ec.

The initial and annual stack testing requirements pursuant to 326 IAC 11-6 and 40 CFR 60, Subpart Ce combined with the compliance monitoring of the incinerator and wet scrubber have been determined to be sufficient to demonstrate compliance with the applicable limits. No changes were made to the permit as a result of this comment.

The following updates have been made to incorporate the Article 2 rule revisions that were adopted on October 3, 2001, and became effective on January 19th, 2002. For more information about this rulemaking, refer to the October 2001 Air Pollution Control Board Packet which can be found on the internet at http://www.state.in.us/idem/air/rules/apcb/packets/index.html. The rule revisions were published in the February 1, 2002 Indiana Register which can be found on the internet at http://www.IN.gov/legislative/register/index-25.html.

1. The following new rule cite has been added to condition B.2 Permit Term as follows:

B.2 Permit Term [326 IAC 2-7-5(2)]**[326 IAC 2-1.1-9.5]**

This permit is issued for a fixed term of five (5) years from the original date, as determined in accordance with IC 4-21.5-3-5(f) and IC 13-15-5-3. Subsequent revisions, modifications, or amendments of this permit do not affect the expiration date.

2. In condition B.12 Emergency Provisions, paragraphs (a), (b) and (g) have been revised to reflect rule changes to 326 IAC 2-7-16. This section of the rule is now consistent with 40 CFR 70.6(g) and provides an affirmative defense to an action brought for non-compliance with technology based emission limitations only.

B.12 Emergency Provisions [326 IAC 2-7-16]

(a) An emergency, as defined in 326 IAC 2-7-1(12), is not an affirmative defense for an action brought for noncompliance with a federal or state health-based emission limitation~~, except as provided in 326 IAC 2-7-16.~~

(b) An emergency, as defined in 326 IAC 2-7-1(12), constitutes an affirmative defense to an action brought for noncompliance with a ~~health-based or~~ technology-based emission limitation if the affirmative defense of an emergency is demonstrated through properly signed, contemporaneous operating logs or other relevant evidence that describe the following:

~~(g) Operations may continue during an emergency only if the following conditions are met:~~

~~(1) If the emergency situation causes a deviation from a technology-based limit, the Permittee may continue to operate the affected emitting facilities during the emergency provided the Permittee immediately takes all reasonable steps to correct the emergency and minimize emissions.~~

~~(2) If an emergency situation causes a deviation from a health-based limit, the Permittee may not continue to operate the affected emissions facilities unless:~~

~~(A) The Permittee immediately takes all reasonable steps to correct the emergency situation and to minimize emissions; and~~

~~(B) Continued operation of the facilities is necessary to prevent imminent injury to persons, severe damage to equipment, substantial loss of capital investment, or loss of product or raw materials of substantial economic value.~~

~~Any operation shall continue no longer than the minimum time required to prevent the situations identified in (g)(2)(B) of this condition.~~

3. Condition B.14 Multiple Exceedances has been deleted, because 326 IAC 2-7-5(1)(E) has been repealed, because it conflicted with 40 CFR 70.6(a)(6).

~~B.14 Multiple Exceedances [326 IAC 2-7-5(1)(E)]~~

~~Any exceedance of a permit limitation or condition contained in this permit, which occurs contemporaneously with an exceedance of an associated surrogate or operating parameter established to detect or assure compliance with that limit or condition, both arising out of the same act or occurrence, shall constitute a single potential violation of this permit.~~

4. Condition B.14 Prior Permit Conditions Superseded was added to the permit to implement the intent of the new rule 326 IAC 2-1.1-9.5.

B.14 Prior Permits Superseded [326 IAC 2-1.1-9.5]

(a) All terms and conditions of previous permits issued pursuant to permitting programs approved into the state implementation plan have been either

(1) incorporated as originally stated,

(2) revised, or

(3) deleted

by this permit.

(b) All previous registrations and permits are superseded by this permit.

5. Paragraph (b) has been removed from condition B.13 Permit Shield. Since condition B.14 Prior Permits Superceded has been added to the permit, it is not necessary for this statement to be in this condition.

B.13 Permit Shield [326 IAC 2-7-15] [326 IAC 2-7-20] [326 IAC 2-7-12]

~~(b) This permit shall be used as the primary document for determining compliance with applicable requirements established by previously issued permits. All previously issued operating permits are superseded by this permit.~~

6. In condition C.16 Compliance Response Plan - Failure to Take Response Steps, paragraph (c)(2) "administrative amendment" has been revised to "minor permit modification," because 326 IAC 2-7-11(a)(7) has been repealed. Requests that do not involve significant changes to monitoring, reporting, or record keeping requirements may now be approved as minor permit modifications. Also, the name of the condition has been changed to better reflect the contents of the condition.

C.16 Compliance Response Plan - ~~Failure to Take Response Steps~~ **Preparation, Implementation, Records, and Reports** [326 IAC 2-7-5] [326 IAC 2-7-6]

(c) The Permittee is not required to take any further response steps for any of the following reasons:

(1) A false reading occurs due to the malfunction of the monitoring equipment and prompt action was taken to correct the monitoring equipment.

(2) The Permittee has determined that the compliance monitoring parameters established in the permit conditions are technically inappropriate, has previously submitted a request for ~~an administrative amendment~~ **a minor permit modification** to the permit, and such request has not been denied.

Indiana Department of Environmental Management
Office of Air Quality

Technical Support Document (TSD) for a Part 70 Operating Permit

Source Background and Description

Source Name:	**Parkview Hospital**
Source Location:	**2200 Randallia Drive, Fort Wayne, Indiana 46805**
County:	**Allen**
SIC Code:	**8062**
Operation Permit No.:	**T003-11993-00272**
Permit Reviewer:	**Linda Quigley/EVP**

The Office of Air Quality (OAQ) has reviewed a Part 70 permit application from Parkview Hospital relating to the operation of a medical waste incinerator and two (2) boilers at a general medical hospital.

Permitted Emission Units and Pollution Control Equipment

The source consists of the following permitted facilities/units:

(a) One (1) medical waste incinerator, identified as INC, installed in 1984, firing natural gas as supplementary fuel, with a maximum charge rate of 1200 pounds of medical waste per hour, rated at 4.0 million British thermal units (MMBtu) per hour, and exhausting to Stack 1.

(b) Two (2) natural gas fired boilers, firing No. 2 distillate fuel oil as backup, identified as Boiler #1 and Boiler #2, installed in 1971, each rated at 39 MMBtu per hour, and each exhausting to Stack 2.

Unpermitted Emission Units and Pollution Control Equipment

There are no unpermitted facilities operating at this source during this review process.

New Emission Units and Pollution Control Equipment

This medical waste incinerator is undergoing retrofitting to comply with 326 IAC 11-6 and 40 CFR 60, Subpart Ce, and will be equipped with a wet scrubber as control.

Insignificant Activities

The source also consists of the following insignificant activities, as defined in 326 IAC 2-7-1(21):

(a) Natural gas-fired combustion sources with heat input equal to or less than ten (10) million Btu per hour.

(b) Combustion source flame safety purging on startup.

(c) A gasoline fuel transfer and dispensing operation handling less than or equal to 1,300 gallons per day, such as filling of tanks, locomotives, automobiles, having a storage capacity less than or equal to 10,500 gallons.

(d) A petroleum fuel, other than gasoline, dispensing facility, having a storage capacity of less than or equal to 10,500 gallons, and dispensing less than or equal to 230,000 per month.

(1) One (1) jet fuel A storage tank, identified as Tank 6, installed in 1992, with a maximum capacity of 8,000 gallons;

(e) Storage tanks with capacity less than or equal to 1,000 gallons and annual throughput less than 12,000 gallons.

(1) One (1) gasoline storage tank, identified as Tank 4, installed in June 1994, with a maximum capacity of 500 gallons;

(2) One (1) diesel fuel storage tank, identified as Tank 5, installed in June 1994, with a maximum capacity of 500 gallons;

(3) Two (2) #2 fuel oil storage tanks, identified as Tanks 7 and 8, installed in 2000, each with a maximum capacity of 300 gallons.

(f) Machining where an aqueous cutting coolant continuously floods the machining interface;

(g) Degreasing operations that do not exceed 145 gallons per 12 months, except if subject to 326 IAC 20-6.

(h) Cleaners and solvents characterized as follows:
A) having a vapor pressure equal to or less than 2 kPa; 15mm Hg; or 0.3 psi measured at 38 degrees C (100^{o}F) or;
B) having a vapor pressure equal to or less than 0.7 kPa; 5mm Hg; or 0.1 psi measured at 20 degrees C (68^{o}F); the use of which for all cleaners and solvents combined does not exceed 145 gallons per 12 months.

(i) Closed loop heating and cooling systems.

(j) Solvent recycling systems with batch capacity less than or equal to 100 gallons.

(k) Forced and induced draft cooling tower system not regulated under a NESHAP.

(l) Heat exchanger cleaning and repair.

(m) Process vessel degassing and cleaning to prepare for internal repairs.

(n) Paved roads and parking lots with public access.

(o) Asbestos abatement projects regulated by 326 IAC 14-10.

(p) Purging of gas lines and vessels that is related to routine maintenance and repair of buildings, structures, or vehicles at the source where air emissions from those activities would not be associated with any production process.

(q) Equipment used to collect any material that might be released during a malfunction, process upset, or spill cleanup, including catch tanks, temporary liquid separators, tanks, and fluid handling equipment.

(r) Blowdown for any of the following: sight glass; boiler; compressors; pumps; and cooling tower.

(s) On-site fire and emergency response training approved by the department.

(t) Emergency generators as follows:

(1) Emergency diesel generators not exceeding 1600 horsepower.

A) Three (3) emergency generators at 835 HP;

B) One (1) emergency generator at 1310 HP;

C) One (1) emergency generator at 1325 HP;

(2) Natural gas turbines or reciprocating engines not exceeding 16,000 horsepower.
A) Two (2) at 450 HP.

(u) Other emergency equipment as follows:

(1) Stationary fire pumps.
A) One stationary fire pump at 60 HP.

(v) Grinding and machining operations controlled with fabric filters, scrubbers, mist collectors, wet collectors and electrostatic precipitators with a design grain loading of less than or equal to 0.03 grains per actual cubic foot and a gas flow rate less than or equal to 4000 actual cubic feet per minute, including the following: deburring; buffing; polishing; abrasive blasting; pneumatic conveying; and woodworking operations.

(w) Purge double block and bleed valves.

(x) Filter or coalescer media changeout.

(y) A laboratory as defined in 326 IAC 2-7-1(21)(D).

(z) Other activities or categories not previously identified:

(1) Two (2) #2 fuel oil underground storage tanks, identified as Tanks 1 and 2, installed in 1971, each with a maximum capacity of 25,000 gallons;

(2) One (1) #2 fuel oil underground storage tank, identified as Tank 3, installed in 1971, with a maximum capacity of 20,000 gallons;

Existing Approvals

The source has been operating under previous approvals including, but not limited to, the following:

Registration issued on November 29, 1983 (no permit number).

Enforcement Issue

There are no enforcement actions pending.

Recommendation

The staff recommends to the Commissioner that the Part 70 permit be approved. This recommendation is based on the following facts and conditions:

Unless otherwise stated, information used in this review was derived from the application and additional information submitted by the applicant.

An administratively complete Part 70 permit application for the purposes of this review was received on March 9, 2000.

There was no notice of completeness letter mailed to the source.

Emission Calculations

See Appendix A of this document for detailed emissions calculations, pages 1 through 10.

Potential To Emit

Pursuant to 326 IAC 2-1.1-1(16), Potential to Emit is defined as "the maximum capacity of a stationary source to emit any air pollutant under its physical and operational design. Any physical or operational limitation on the capacity of a source to emit an air pollutant, including air pollution control equipment and restrictions on hours of operation or type or amount of material combusted, stored, or processed shall be treated as part of its design if the limitation is enforceable by the U. S. EPA."

This table reflects the PTE before controls. Control equipment is not considered federally enforceable until it has been required in a federally enforceable permit.

Pollutant	Potential To Emit (tons/year)
PM	18.79
PM-10	18.23
SO_2	112.80
VOC	3.70
CO	43.99
NO_x	90.85

Note: For the purpose of determining Title V applicability for particulates, PM-10, not PM, is the regulated pollutant in consideration.

HAP's	Potential To Emit (tons/year)
Hydrogen Chloride	88.04
Lead	0.190
Hexane	0.645
Hydrogen Fluoride	0.392
Mercury	0.281
TOTAL	89.25

Note: See Appendix A for complete listing of HAPs.

(a) The potential to emit (as defined in 326 IAC 2-1.1-1(16)) of SO2 is equal to or greater than 100 tons per year. Therefore, the source is subject to the provisions of 326 IAC 2-7.

(b) The potential to emit (as defined in 326 IAC 2-1.1-1(16)) of any single HAP is equal to or greater than ten (10) tons per year and the potential to emit (as defined in 326 IAC 2-7-1(29)) of a combination HAPs is greater than or equal to twenty-five (25) tons per year. Therefore, the source is subject to the provisions of 326 IAC 2-7.

(c) Pursuant to 326 IAC 11-6-3, Medical Waste Incinerators: Permits, facilities subject to 326 IAC 11-6 shall submit an application for a Part 70 permit, in accordance with 326 IAC 2-7-4, to the department no later than March 11, 2000. Therefore, although the potential to emit HAPs after the incinerator is retrofit with a scrubber is less than major source levels, a Part 70 Operating Permit is required for this source because it is subject to the

requirements of 326 IAC 11-6, Hospital/Medical/Infectious Waste Incinerators and because the potential to emit SO2 is still greater than major source levels.

Actual Emissions

No previous emission data has been received from the source.

Potential to Emit After Issuance

The table below summarizes the potential to emit, reflecting all limits, of the significant emission units after controls. The control equipment is considered federally enforceable only after issuance of this Part 70 operating permit.

	Potential to Emit (tons/year)							
Process/facility	PM	PM-10	SO_2	VOC	CO	NO_X	Single HAP	Total HAPs
Medical Waste Incinerator	3.89	3.89	0.07	0.37	7.75	9.36	0.39	1.42
Two (2) boilers	4.88	4.88	103.96	1.88	28.70	48.81	0.615	0.645
Emergency Generators	0.94	0.94	3.14	0.92	7.54	32.68	negl.	negl.
Insignificant Activities	0.70	0.14	0.00	0.12	0.00	0.00	negl.	negl.
Total Emissions	10.41	9.85	107.17	3.28	43.99	90.85	1.01	2.07

County Attainment Status

The source is located in Allen County.

Pollutant	Status
PM-10	attainment
SO_2	attainment
NO_2	attainment
Ozone	attainment
CO	attainment
Lead	attainment

(a) Volatile organic compounds (VOC) and oxides of nitrogen (NOx) are precursors for the formation of ozone. Therefore, VOC and NO_X emissions are considered when evaluating the rule applicability relating to the ozone standards. Allen County has been designated as attainment or unclassifiable for ozone. Therefore, VOC and NOx emissions were reviewed pursuant to the requirements for Prevention of Significant Deterioration (PSD), 326 IAC 2-2 and 40 CFR 52.21.

(b) Allen County has been classified as attainment or unclassifiable for other criteria pollutants. Therefore, these emissions were reviewed pursuant to the requirements for Prevention of Significant Deterioration (PSD), 326 IAC 2-2 and 40 CFR 52.21.

Part 70 Permit Conditions

This source is subject to the requirements of 326 IAC 2-7, pursuant to which the source has to meet the following:

(a) Emission limitations and standards, including those operational requirements and limitations that assure compliance with all applicable requirements at the time of issuance of Part 70 permits.

(b) Monitoring and related record keeping requirements which assume that all reasonable information is provided to evaluate continuous compliance with the applicable requirements.

Federal Rule Applicability

(a) This Part 70 does not involve a pollutant specific emissions unit with the potential to emit after control in an amount equal to or greater than one hundred (100) tons per year. Therefore, the requirements of 40 CFR Part 64, Compliance Assurance Monitoring, are not applicable.

(b) The one (1) medical waste incinerator, identified as INC, is subject to the New Source Performance Standard, 326 IAC 12, (40 CFR 60.30e, Subpart Ce). The one (1) medical waste incinerator, identified as INC, shall comply with the following emission limits:

(1) Particulate Matter emissions shall not exceed 0.015 grains per dry standard cubic foot for large Hospital/Medical/Infectious Waste Incinerators. The incinerator is classified as large pursuant to 40 CFR 60.51c because it has a maximum design waste burning capacity greater than five hundred (500) pounds per hour.

(2) Carbon Monoxide emissions shall not exceed 40 parts per million by volume;

(3) Dioxins/furans shall not exceed 55 grains per billion dry standard cubic feet total dioxins/furans or 1.0 grains per billion dry standard cubic feet toxic equivalent quantity (TEQ);

(4) Hydrogen chloride emissions shall not exceed 100 parts per million by volume or a 93% reduction;

(5) Sulfur dioxide emissions shall not exceed 55 parts per million by volume;

(6) Nitrogen oxide emissions shall not exceed 250 parts per million by volume;

(7) Lead emissions shall not exceed 0.52 grains per thousand dry standard cubic feet or a 70% reduction;

(8) Cadmium emissions shall not exceed 0.07 grains per thousand dry standard cubic feet or a 65% reduction;

(9) Mercury emissions shall not exceed 0.24 grains per thousand dry standard cubic feet or a 85% reduction; and

(10) Discharge into the atmosphere of any gases shall not exceed ten percent (10%) opacity (6-minute block average).

The provisions of 40 CFR 60 Subpart A - General Provisions, which are incorporated as 326 IAC 12-1, apply to the one (1) Medical Waste Incinerator, identified as INC, except when otherwise specified in 40 CFR 60 Subpart Ce.

(c) The one (1) Medical Waste Incinerator, identified as INC, is not subject to the requirements of the New Source Performance Standard, 326 IAC 12, (40 CFR Part 60.50c), Subpart Ec, because the incinerator was constructed prior to June 20, 1996.

(d) The two (2) boilers, identified as Boiler #1 and Boiler #2, are not subject to the New Source Performance Standard, 326 IAC 12, (40 CFR Part 60.40c), Subpart Dc, because each boiler was constructed prior to June 9, 1989.

(e) The two (2) boilers, identified as Boiler #1 and Boiler #2, are not subject to the New Source Performance Standard, 326 IAC 12, (40 CFR Part 60.40c), Subparts D, Da or Db, because each boiler is rated at less than one hundred (100) million British thermal units per hour (MMBtu).

(f) The three (3) fuel storage tanks, identified as Tank 1, Tank 2, and Tank 3, are not subject to the New Source Performance Standard, 326 IAC 12, (40 CFR Part 60110, 60.110a or 60.110b), Subpart K, Ka or Kb, because each tank was constructed prior to June 11, 1973.

(g) The five (5) fuel storage tanks, identified as Tank 4, Tank 5, Tank 6, Tank 7 and Tank 8, are not subject to the New Source Performance Standard, 326 IAC 12, (40 CFR Part 60110, 60.110a or 60.110b), Subpart K, Ka or Kb, because each tank has a capacity less than forty (40) cubic meters.

(h) There are no National Emission Standards for Hazardous Air Pollutants (NESHAPs)(326 IAC 14 and 40 CFR Part 63) applicable to this source.

(i) There are no halogenated solvents used in the degreasing operations. Therefore, this source is not subject to the requirements of the National Emission Standards for Hazardous Air Pollutants (NESHAPs), Part 63, Subpart T.

State Rule Applicability - Entire Source

326 IAC 2-2 (Prevention of Significant Deterioration)

This source is not subject to the requirements of 326 IAC 2-2 (PSD) because the potential emissions of all regulated pollutants is less than 250 tons per year and it is not one of the twenty-eight (28) listed source categories under 326 IAC 2-2.

326 IAC 2-6 (Emission Reporting)

This source is subject to 326 IAC 2-6 (Emission Reporting), because it has the potential to emit more than one hundred (100) tons per year of SO2. Pursuant to this rule, the owner/operator of the source must annually submit an emission statement for the source. The annual statement must be received by July 1 of each year and contain the minimum requirement as specified in 326 IAC 2-6-4. The submittal should cover the period defined in 326 IAC 2-6-2(8)(Emission Statement Operating Year).

326 IAC 5-1 (Opacity Limitations)

Pursuant to 326 IAC 5-1-2 (Opacity Limitations), except as provided in 326 IAC 5-1-3 (Temporary Alternative Opacity Limitations), opacity shall meet the following, unless otherwise stated in this permit:

(a) Opacity shall not exceed an average of forty percent (40%) any one (1) six (6) minute averaging period as determined in 326 IAC 5-1-4.

(b) Opacity shall not exceed sixty percent (60%) for more than a cumulative total of fifteen (15) minutes (sixty (60) readings as measured according to 40 CFR 60, Appendix A, Method 9 or fifteen (15) one (1) minute nonoverlapping integrated averages for a continuous opacity monitor) in a six (6) hour period.

State Rule Applicability - Individual Facilities

326 IAC 2-4.1-1 (New Source Toxics Control)

The one (1) medical waste incinerator, identified as INC, is not subject to the requirements of 326 IAC 2-4.1-1, New Source Toxics Control, because it was constructed prior to July 27, 1997.

326 IAC 4-2-2 (Incinerators)

Pursuant to 326 IAC 4-2-2, the one (1) Hospital Medical Infectious Waste Incinerator, identified as INC, with a maximum charge rate of 1200 pounds of medical waste per hour shall:

(1) Consist of primary and secondary chambers or the equivalent;

(2) be equipped with a primary burner unless burning wood products;

(3) comply with 326 IAC 5-1 and 326 IAC 2;

(4) be maintained properly as specified by the manufacturer and approved by the commissioner;

(5) be operated according to the manufacturer's recommendations and only burn waste approved by the commissioner;

(6) comply with other state and/or local rules or ordinances regarding installation and operation of incinerators;

(7) be operated so that emissions of hazardous material including, but not limited to, viable pathogenic bacteria, dangerous chemicals or gases, or noxious odors are prevented;

(8) not emit particulate matter in excess of five-tenths (0.3) pounds of particulate matter per one thousand (1,000) pounds of dry exhaust gas at standard conditions corrected to fifty percent (50%) excess air; and

(9) not create a nuisance or a fire hazard.

If any of the above result, the burning shall be terminated immediately.

The incinerator, with wet scrubber control, has a maximum exhaust rate of 0.0187 pounds of PM per 1,000 pounds of dry exhaust gas, corrected to fifty percent (50%) excess air. Therefore, the incinerator, with wet scrubber control, is in compliance with this rule.

326 IAC 6-2-3 (Particulate Emission Limitations for Facilities Constructed prior to September 21, 1983)

The two (2) boilers, identified as Boiler #1 and Boiler #2, each constructed in 1971, with a total heat input capacity of 78.0 million British thermal units per hour, must comply with the PM emission limitation of 326 IAC 6-2-3. This limitation is based on the following equation given in 326 IAC 6-2-3:

$$Pt = C \times a \times h / 76.5 \times Q^{0.75} \times N^{0.25}$$

where:

Pt = Pounds of particulate matter emitted per million British thermal units (lb/MMBtu) heat input

Q = Total source maximum operating capacity rating in million British thermal units per hour (MMBtu/hr) heat input. The maximum operating capacity rating is defined as the maximum capacity at which the facility is operated or the nameplate capacity, which-ever is specified in the facility's permit application, except when some lower capacity is contained in the facility's operation permit; in which case, the capacity specified in the operation permit shall be used.

C = Maximum ground level concentration with respect to distance from the point source at the "critical" wind speed for level terrain. This shall equal 50 micrograms per cubic meter for a period not to exceed a sixty (60) minute time period.

N = Number of stacks in fuel burning operation.

a = Plume rise factor which is used to make allowance for less than theoretical plume rise. The value 0.67 shall be used for Q less than or equal to 1,000 MMBtu/hr heat input. The value 0.8 shall be used for Q greater than 1,000 MMBtu/hr heat input.

h = Stack height in feet.

For the two (2) boilers:

$Pt = 50 \times 0.67 \times 78.75 / 76.5 \times (78.0)^{0.75} \times 1^{0.25} = 1.31$ lb/MMBtu

Pursuant to 326 IAC 6-2-3(d), Pt for all facilities used for indirect heating purposes which were existing and in operation on or before June 8, 1972 shall not exceed 0.8 pounds per million British thermal units. Therefore, the two (2) boilers are limited to emissions of 0.8 pounds per million British thermal units.

Based on Appendix A, the total potential to emit of PM from the two (2) boilers is 4.88 tons per year.

4.88 tons/yr × (2000 lbs/ton / 8760 hrs/yr) = 1.11 lbs/hr
(1.11 lbs/hr / 78.0 MMBtu/hr) = 0.014 lbs PM per MMBtu
Therefore, the two (2) boilers, identified as Boiler #1 and Boiler #2, will comply with this rule.

326 IAC 6-3-2 (Process Operations)

Pursuant to 326 IAC 6-3-2(c), the allowable particulate matter emissions rate from any process not already regulated by 326 IAC 6-1 or any New Source Performance Standard, and which has a maximum process weight rate less than 100 pounds per hour shall not exceed 0.551 pounds per hour. The grinding and machining operations listed in the insignificant activities section shall be subject to this limit.

326 IAC 7-1.1 (Sulfur Dioxide Emission Limitations)

The two (2) natural gas-fired boilers using no. 2 fuel oil as back-up fuel are subject to 326 IAC 7-1.1 (Sulfur Dioxide Emission Limitations). Pursuant to 326 IAC 7-1.1-2, sulfur dioxide emissions from the two (2) boilers using No. 2 fuel oil shall be limited to 0.5 pounds per million BTU heat input when using No. 2 fuel oil. This equates to a fuel oil sulfur content limit of 0.5%.

326 IAC 7-2-1 (Sulfur Dioxide Reporting Requirements)

This source is subject to 326 IAC 7-2-1 (Reporting Requirements). This rule requires the source to submit to the Office of Air Quality upon request records of sulfur content, heat content, fuel consumption, and sulfur dioxide emission rates based on a calendar-month average.

326 IAC 8-3 (Degreasing Operations)

(a) Pursuant to 326 IAC 8-3-2 (Cold Cleaner Operations) for cold cleaning operations constructed after January 1, 1980, the owner or operator shall:

(1) equip the cleaner with a cover;

(2) equip the cleaner with a facility for draining cleaned parts;

(3) close the degreaser cover whenever parts are not being handled in the cleaner;

(4) drain cleaned parts for at least fifteen (15) seconds or until dripping ceases;

(5) provide a permanent, conspicuous label summarizing the operation requirements;

(6) store waste solvent only in covered containers and not dispose of waste solvent or transfer it to another party, in such a manner that greater than twenty percent (20%) of the waste solvent (by weight) can evaporate into the atmosphere.

(b) Pursuant to 326 IAC 8-3-5(a) (Cold Cleaner Degreaser Operation and Control), the owner or operator of a cold cleaner degreaser facility construction of which commenced after July 1, 1990, shall ensure that the following control equipment requirements are met:

(1) Equip the degreaser with a cover. The cover must be designed so that it can be easily operated with one (1) hand if:

(A) the solvent volatility is greater than two (2) kiloPascals (fifteen (15) millimeters of mercury or three-tenths (0.3) pounds per square inch) measured at thirty-eight degrees Celsius ($38^{O}C$) (one hundred degrees Fahrenheit ($100^{O}F$));

(B) the solvent is agitated; or

(C) the solvent is heated.

(2) Equip the degreaser with a facility for draining cleaned articles. If the solvent volatility is greater than four and three-tenths (4.3) kiloPascals (thirty-two (32) millimeters of mercury) or six-tenths (0.6) pounds per square inch) measured at thirty-eight degrees Celsius ($38^{O}C$) (one hundred degrees Fahrenheit ($100^{O}F$)), then the drainage facility must be internal such that articles are enclosed under the cover while draining. The drainage facility may be external for applications where an internal type cannot fit into the cleaning system.

(3) Provide a permanent, conspicuous label which lists the operating requirements outlined in subsection (b).

(4) The solvent spray, if used, must be a solid, fluid stream and shall be applied at a pressure which does not cause excessive splashing.

(5) Equip the degreaser with one (1) of the following control devices if the solvent volatility is greater than four and three-tenths (4.3) kiloPascals (thirty-two (32) millimeters of mercury) or six-tenths (0.6) pounds per square inch) measured at thirty-eight degrees Celsius ($38^{O}C$) (one hundred degrees Fahrenheit ($100^{O}F$)), or if the solvent is heated to a temperature greater than forty-eight and nine-tenths degrees Celsius ($48.9^{O}C$) (one hundred twenty degrees Fahrenheit ($120^{O}F$)):

(A) A freeboard that attains a freeboard ratio of seventy-five hundredths (0.75) or greater.

(B) A water cover when solvent is used is insoluble in, and heavier than, water.

(C) Other systems of demonstrated equivalent control such as a refrigerated chiller of carbon adsorption. Such systems shall be submitted to the U.S. EPA as a SIP revision.

(c) Pursuant to 326 IAC 8-3-5(b) (Cold Cleaner Degreaser Operation and Control), the owner or operator of a cold cleaning facility construction of which commenced after July 1, 1990, shall ensure that the following operating requirements are met:

(1) Close the cover whenever articles are not being handled in the degreaser.

(2) Drain cleaned articles for at least fifteen (15) seconds or until dripping ceases.

(3) Store waste solvent only in covered containers and prohibit the disposal or transfer of waste solvent in any manner in which greater than twenty percent (20%) of the waste solvent by weight could evaporate.

326 IAC 9-1-2 (Carbon Monoxide Emissions)

No person shall cause or allow the discharge of carbon monoxide from refuse incineration or burning equipment, unless the waste gas stream is burned in a direct-flame afterburner or is controlled by other means approved by the commissioner. This source complies with this rule with the use of a multiple chamber incinerator with afterburners.

326 IAC 11-6 (Hospital/Medical/Infectious Waste Incinerator)

(a) The medical waste incinerator, identified as INC, is subject to 326 IAC 11-6 and 40 CFR 60, Subpart Ce with a compliance date of one year after the effective date of the rule, unless the facility is undergoing retrofit to come into compliance where compliance is required no later than March 31, 2002.

(b) Pursuant to 326 IAC 11-6-9, the source shall install the necessary air pollution control equipment and be in compliance with all provisions of this rule no later than March 31, 2002, provided the following measurable and enforceable incremental steps of progress are taken:

(1) Submit a final control plan no later than June 30, 1999 (This source submitted a final control plan on June 23, 1999);

(2) Award contracts for emissions control systems or for process modifications, or issuance of orders for the purchase of component parts to accomplish emission control or process modifications no later than March 31, 2000 (This source issued a purchase order in March, 2000);

(3) Initiate on-site construction or installation of emission control equipment or process change no later than March 31, 2001 (This source initiated on-site construction in April 2001);

(4) Complete on-site construction or installation of emission control equipment or process change no later than September 30, 2001 (As of November 29, 2001, the source states it has some wiring and mechanical to be completed. Building and emission control equipment is in place);

(5) Be in final compliance no later than March 31, 2002; and

(6) The source shall be in compliance with the operator training and qualification requirements by March 11, 2000 (This source certified one operator February 12, 2000, the remainder of the operators were certified April 12, 2000. All operators were re-certified in April 2001).

(c) Pursuant to 326 IAC 11-6-4 and 40 CFR 60, Subpart Ce, the medical waste incinerator shall comply with the following emission limits:

(1) Particulate Matter emissions shall not exceed 0.015 grains per dry standard cubic foot for large Hospital/Medical/Infectious Waste Incinerators;

(2) Carbon Monoxide emissions shall not exceed 40 parts per million by volume;

(3) Dioxins/furans shall not exceed 55 grains per billion dry standard cubic feet total dioxins/furans or 1.0 grains per billion dry standard cubic feet toxic equivalent quantity (TEQ);

(4) Hydrogen chloride emissions shall not exceed 100 parts per million by volume or a 93% reduction;

(5) Sulfur dioxide emissions shall not exceed 55 parts per million by volume;

(6) Nitrogen oxide emissions shall not exceed 250 parts per million by volume;

(7) Lead emissions shall not exceed 0.52 grains per thousand dry standard cubic feet or a 70% reduction;

(8) Cadmium emissions shall not exceed 0.07 grains per thousand dry standard cubic feet or a 65% reduction;

(9) Mercury emissions shall not exceed 0.24 grains per thousand dry standard cubic feet or a 85% reduction.

(10) Discharge into the atmosphere of any gases shall not exceed ten percent (10%) opacity.

(d) Pursuant to 326 IAC 11-6-5 and 40 CFR 60, Subpart Ce, the medical waste incinerator shall not operate at any time unless a fully trained and qualified Hospital/Medical/Infectious Waste Incinerator (HMIWI) operator is accessible either at the facility or available within one (1) hour. The following documentation shall be maintained at the facility and an initial review of the information with each HMIWI operator shall be conducted within six (6) months after the effective date of this rule or prior to assumption of responsibilities affecting HMIWI operation, whichever date is later, and annually, thereafter:

(1) Summary of the applicable standards;

(2) Description of basic combustion theory applicable to an HMIWI;

(3) Procedures for receiving, handling, and charging waste;

(4) HMIWI startup, shutdown and malfunction procedures;

(5) Procedures for maintaining proper combustion air supply levels;

(6) Procedures for operating the HMIWI and associated air pollution control systems;

(7) Procedures for responding to periodic malfunction or conditions that may lead to malfunction;

(8) Procedures for monitoring HMIWI emissions;

(9) Reporting and Recordkeeping;

(10) Procedures for handling ash.

(e) Pursuant to 326 IAC 11-6-6, the Permittee shall prepare and submit a waste management plan as specified in 40 CFR 60.55c no later than sixty (60) days following the initial performance test.

(1) The Waste Management Plan must identify both the feasibility and the approach to separate certain components of solid waste from the health care waste stream in order to reduce the amount of toxic emissions from incinerated waste.

(2) The Waste Management Plan may include, but is not limited to:

(A) materials such as paper, cardboard, plastics, glass, batteries, or metal recycling; or

(B) purchasing recycled or recycled products.

(3) The Waste Management Plan may include different goals or approaches for different areas or departments of the facility and need not include new waste management goals for every waste stream.

(4) The Waste Management Plan should identify, where possible:

(A) reasonably available additional waste management measures;

(B) taking into account the effectiveness of waste management measures already in place;

(C) the cost of additional measures;

(D) the emission reductions expected to be achieved; and

(E) any other environmental or energy impacts they might have.

(5) The American Hospital Association publication entitled “An Ounce of Prevention: Waste Reduction Strategies” shall be considered in the development of the Waste Management Plan.

(6) Additional requirements:

(A) The Waste Management Plan shall address proper waste segregation.

(B) The Waste Management Plan shall address the management of such waste stream to assure that the Permittee is in compliance with local,

state, and federal waste management rules.

(C) The Waste Management Plan shall address proper management of all mercury-containing items.

(D) The Waste Management Plan shall identify all items that could become mercury-containing wastes.

(E) The Permittee shall monitor its waste stream for mercury-containing waste, and shall maintain a list of common mercury-containing items. Common mercury-containing items include, but are not limited to:

(i) Thermometers (silver colored liquid inside);

(ii) Thermostats (non-electronic);

(iii) Flourescent and other mercury vapor lighting (high intensity discharge -HID, metal halide, high pressure sodium and neon bulbs);

(iv) Gauges (barometers, manometers, blood pressure and vacuum gauges with silver colored liquid);

(v) Batteries (mercuric oxide and some alkaline batteries);

(vi) Paint (latex manufactures before 1990, and some oil-based paints; check the label);

(vii) Thimerosal or merbromine (in some antibacterial products);

(viii) Elemental mercury (from labs);

(ix) Esophageal dialators; and

(x) Laboratory fixatives.

(F) The Permittee shall include plans to eliminate all mercury-containing items from the waste stream of the incinerator.

(G) The Waste Management Plan shall address the training of all affected staff on proper waste management practices of mercury-containing items and other solid, hazardous and medical waste items.

(H) The Permittee shall have Waste Management Plans for all facilities owned by the Permittee that send waste to this incinerator. Each Waste Management Plan shall comply with the requirements of this condition.

Testing Requirements

(a) Pursuant to 326 IAC 11-6-7 and 40 CFR 60, Subpart Ce, an initial performance test to demonstrate compliance with Condition D.1.2 of the proposed permit must be conducted no later than March 31, 2002. Compliance shall be determined according to 326 IAC 3-6 concerning source sampling procedures and 40 CFR 60, Subpart Ec, Section 60.56c, excluding the fugitive emissions testing requirements under Section 60.56c(b)(12) and 60.56(c)(3).

(b) Pursuant to 40 CFR 60.56c(c)(2) and (3), annual performance testing to demonstrate compliance with the PM, CO, and HCl emission limits established in Condition D.1.2 shall be performed each year following the initial performance test. If all three (3) performance tests over a three (3) consecutive year period indicate compliance with the emission limit for a pollutant (PM, CO, or HCl), the owner or operator may forego a performance test for that pollutant for the subsequent two (2) years. At a minimum, a performance test for PM, CO, and HCl shall be conducted every third year (no more than thirty-six (36) months following the previous performance test). If a performance test conducted every third year indicates compliance with the emission limit for a pollutant (PM, CO, or HCl), the owner or operator may forego a performance test for that pollutant for an additional two (2) years. If any performance test indicates noncompliance with the respective emission limit, a performance test for that pollutant shall be conducted annually until all annual performance tests over a three (3) consecutive year period indicate compliance with the emission limit. The use of the bypass stack during a performance test shall invalidate the performance test.

(c) Pursuant to 40 CFR 60.56c(c)(1), the Permittee shall determine compliance with the opacity limit established in Condition D.1.2 by conducting an annual performance test (no more than twelve (12) months following the previous performance test).

(d) No testing is required for the two (2) boilers, identified as identified as Boiler #1 and Boiler #2, because there are no control devices and emissions were based on AP-42 emission factors.

(e) The use of a Jerome Meter to detect mercury-containing waste will not be required by this permit because the hospital is burning its own waste, and this source will address and monitor mercury-containing wastes as part of the Waste Management Plan required by 326 IAC 11-6.

Compliance Requirements

Permits issued under 326 IAC 2-7are required to ensure that sources can demonstrate compliance with applicable state and federal rules on a more or less continuous basis. All state and federal rules contain compliance provisions, however, these provisions do not always fulfill the requirement for a more or less continuous demonstration. When this occurs IDEM, OAQ, in conjunction with the source, must develop specific conditions to satisfy 326 IAC 2-7-5. As a result, compliance requirements are divided into two sections: Compliance Determination Requirements and Compliance Monitoring Requirements.

Compliance Determination Requirements in Section D of the permit are those conditions that are found more or less directly within state and federal rules and the violation of which serves as grounds for enforcement action. If these conditions are not sufficient to demonstrate continuous compliance, they will be supplemented with Compliance Monitoring Requirements, also Section D of the permit. Unlike Compliance Determination Requirements, failure to meet Compliance Monitoring conditions would serve as a trigger for corrective actions and not grounds for enforcement action. However, a violation in relation to a compliance monitoring condition will arise through a source's failure to take the appropriate corrective actions within a specific time period.

The compliance monitoring requirements applicable to this source are as follows:

(a) The one (1) Hospital Medical Infectious Waste Incinerator, identified as INC, has applicable compliance monitoring conditions as specified below:

(1) Visible emission notations of the incinerator/scrubber stack(s) exhaust shall be

performed once per shift during normal daylight operations until the final compliance date of March 31, 2002, or upon complying with the monitoring requirements of 326 IAC 11-6 and 40 CFR 60 Subpart Ce, whichever is earlier, when exhausting to the atmosphere. After March 31, 2002, the monitoring requirements of 326 IAC 11-6 and 40 CFR 60 Subpart Ce will make these visible emissions notations unnecessary. A trained employee shall record whether emissions are normal or abnormal. For processes operated continuously "normal" means those conditions prevailing, or expected to prevail, eighty percent (80%) of the time the process is in operation, not counting startup or shut down time. In the case of batch or discontinuous operations, readings shall be taken during that part of the operation that would normally be expected to cause the greatest emissions. A trained employee is an employee who has worked at the plant at least one (1) month and has been trained in the appearance and characteristics of normal visible emissions for that specific process. The Compliance Response Plan for this unit shall contain troubleshooting contingency and response steps for when an abnormal emission is observed. Failure to take response steps in accordance with Section C - Compliance Response Plan - Failure to Take Response Steps, shall be considered a violation of this permit.

(2) Pursuant to 326 IAC 11-6-7 and 40 CFR 60.57c, the Permittee shall install, calibrate (to manufacturers specifications), maintain, and operate devices (or establish methods) for monitoring the applicable operating parameters at all times except during periods of startup or shutdown. The following operational parameters for the one (1) medical waste incinerator equipped with a wet scrubber shall be measured continuously, and recorded at the specified time intervals:

(A) Maximum charge rate, recorded once per hour;

(B) Maximum flue gas temperature, recorded once per minute;

(C) Minimum secondary chamber temperature, recorded once per minute;

(D) Minimum pressure drop across the wet scrubber or minimum horsepower or amperage to the wet scrubber, recorded once per minute;

(E) Minimum scrubber liquor flow rate, recorded once per minute; and

(F) Minimum scrubber liquor pH, recorded once per minute.

(3) The Permittee shall install, calibrate (to manufacturers specifications), maintain, and operate devices (or establish methods) for measuring the use of the bypass stack including date, time, and duration.

(4) The Permittee shall obtain monitoring data at all times during Hospital/Medical/ Infectious Waste Incinerator operation except during periods of monitoring equipment malfunction, calibration, or repair. At a minimum, valid monitoring data shall be obtained for 75 percent of the operating hours per day and for 90 percent of the operating days per calendar quarter that the affected facility is combusting hospital waste and/or medical/infectious waste.

(5) The Permittee shall monitor mercury-containing items in the waste stream as required by the Waste Management Plan. These monitoring conditions are necessary because the wet scrubber and the one (1) Hospital Medical Infectious Waste Incinerator must operate properly to ensure compliance with 326 IAC 11-6-4 and 40 CFR 60, Subpart Ce.

(b) The two (2) boilers, identified as Boiler #1 and Boiler #2, have applicable compliance monitoring conditions as specified below:

(1) Visible emission notations of the boiler stack (Stack 2) exhaust shall be performed once per shift during normal daylight operations when either of the two (2) boilers are combusting No. 2 distillate oil and exhausting to the atmosphere. A trained employee shall record whether emissions are normal or abnormal. For processes operated continuously, "normal" means those conditions prevailing, or expected to prevail, eighty percent (80%) of the time the process is in operation, not counting startup or shut down time. In the case of batch or discontinuous operations, readings shall be taken during that part of the operation that would normally be expected to cause the greatest emissions. A trained employee is an employee who has worked at the plant at least one (1) month and has been trained in the appearance and characteristics of normal visible emissions for that specific process. The Compliance Response Plan for this unit shall contain troubleshooting contingency and response steps for when an abnormal emission is observed. Failure to take response steps in accordance with Section C - Compliance Response Plan - Failure to Take Response Steps, shall be considered a violation of this permit.

These monitoring conditions are necessary because the two (2) boilers must be operating properly to ensure compliance with 326 IAC 6-2-3 and 326 IAC 2-7.

Conclusion

The operation of the two (2) boilers and the medical waste incinerator at this general medical hospital shall be subject to the conditions of the attached proposed **Part 70 Permit No. T003-11993-00272.**

Appendix A: Emission Calculations

Company Name: **Parkview Hospital**
Address City IN Zip: **2200 Randallia Drive, Fort Wayne, Indiana 46805**
TV: **003-11993-00272**
Plt ID: **003-00272**
Reviewer: Linda Quigley/EVP
Date: September 10, 2001

Uncontrolled Potential Emissions (tons/year)

	Emissions Generating Activity				
Pollutant	Industrial Boilers Combustion	Medical Waste Incinerator	Emergency Generators	Insignificant Activities	**TOTAL**
PM	4.88	12.27	0.94	0.70	18.79
PM10	4.88	12.27	0.94	0.14	18.23
SO2	103.96	5.70	3.14	0.00	112.80
NOx	48.81	9.36	32.68	0.00	90.85
VOC	1.88	0.79	0.92	0.12	3.70
CO	28.70	7.75	7.54	0.00	43.99
total HAPs	**0.64**	89.24	negl.	negl.	89.88
worst case single HAP	**0.62**	(Hydrogen Chloride) 88.04	negl.	negl.	88.04

Total emissions based on rated capacity at 8,760 hours/year.

Controlled Potential Emissions (tons/year)

	Emissions Generating Activity				
Pollutant	Industrial Boilers Combustion	Medical Waste Incinerator	Emergency Generators	Insignificant Activities	**TOTAL**
PM	4.88	3.89	0.94	0.70	10.41
PM10	4.88	3.89	0.94	0.14	9.85
SO2	103.96	0.07	3.14	0.00	107.17
NOx	48.81	9.36	32.68	0.00	90.85
VOC	1.88	0.37	0.92	0.12	3.28
CO	28.70	7.75	7.54	0.00	43.99
total HAPs	**0.64**	1.48	negl.	negl.	2.12
worst case single HAP	**(Hexane) 0.615**	(Hydrogen Fluoride) 0.39	negl.	negl.	0.62

Total emissions based on rated capacity at 8,760 hours/year, after control.

Appendix A: Emissions Calculations
Natural Gas Combustion Only
MM BTU/HR <100
Two (2) Industrial Boilers

Company Name: **Parkview Hospital**
Address City IN Zip: **2200 Randallia Drive, Fort Wayne, Indiana 46805**
TV: **003-11993-00272**
Plt ID: **003-00272**
Reviewer: Linda Quigley/EVP
Date: September 10, 2001

	Heat Input Capacity MMBtu/hr	Potential Throughput MMCF/yr
Boiler #1	39.0	341.6
Boiler #2	39.0	341.6
Total	78.0	683.3

	Pollutant					
	PM*	PM10*	SO2	NOx	VOC	CO
Emission Factor in lb/MMCF	1.9	7.6	0.6	100.0 **see below	5.5	84.0
Potential Emission in tons/yr	0.65	2.60	0.20	34.16	1.88	28.70

*PM emission factor is filterable PM only. PM10 emission factor is filterable and condensable PM10 combined.
**Emission Factors for NOx: Uncontrolled = 100, Low NOx Burner = 50, Low NOx Burners/Flue gas recirculation = 32

Methodology

All emission factors are based on normal firing.
MMBtu = 1,000,000 Btu
MMCF = 1,000,000 Cubic Feet of Gas

Potential Throughput (MMCF) = Heat Input Capacity (MMBtu/hr) x 8,760 hrs/yr x 1 MMCF/1,000 MMBtu
Emission Factors are from AP 42, Chapter 1.4, Tables 1.4-1, 1.4-2, 1.4-3, SCC #1-02-006-02, 1-01-006-02, 1-03-006-02, and 1-03-006-03 (SUPPLEMENT D 3/98)
Emission (tons/yr) = Throughput (MMCF/yr) x Emission Factor (lb/MMCF)/2,000 lb/ton

See page 3 for HAPs emissions calculations.

Appendix A: Emissions Calculations
Natural Gas Combustion Only
MM BTU/HR <100
Two (2) Industrial Boilers
HAPs Emissions

Company Name: **Parkview Hospital**
Address City IN Zip: **2200 Randallia Drive, Fort Wayne, Indiana 46805**
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Reviewer: Linda Quigley/EVP
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HAPs - Organics

	Benzene	Dichlorobenzene	Formaldehyde	Hexane	Toluene
Emission Factor in lb/MMcf	2.1E-03	1.2E-03	7.5E-02	1.8E+00	3.4E-03
Potential Emission in tons/yr	7.174E-04	4.100E-04	2.562E-02	6.150E-01	1.162E-03

HAPs - Metals

	Lead	Cadmium	Chromium	Manganese	Nickel
Emission Factor in lb/MMcf	5.0E-04	1.1E-03	1.4E-03	3.8E-04	2.1E-03
Potential Emission in tons/yr	1.708E-04	3.758E-04	4.783E-04	1.298E-04	7.174E-04

Methodology is the same as page 2.

The five highest organic and metal HAPs emission factors are provided above.
Additional HAPs emission factors are available in AP-42, Chapter 1.4.

Appendix A: Emissions Calculations
Two (2) Commercial Boilers (< 100 mmBtu/hr)
#2 Fuel Oil

Company Name: **Parkview Hospital**
Address City IN Zip: **2200 Randallia Drive, Fort Wayne, Indiana 46805**
TV: **003-11993-00272**
Plt ID: **003-00272**
Reviewer: Linda Quigley/EVP
Date: September 10, 2001

Heat Input Capacity MMBtu/hr	Potential Throughput kgals/year	S = Weight % Sulfur 0.3
39	2440.29	
39	2440.29	
78	4880.57	

	Pollutant				
	PM*	SO2	NOx	VOC	CO
Emission Factor in lb/kgal	2.0	42.6 *(142.0S)*	20.0	0.34	5.0
Potential Emission in tons/yr	4.88	103.96	48.81	0.83	12.20

Methodology

1 gallon of No. 2 Fuel Oil has a heating value of 140,000 Btu

Potential Throughput (kgals/year) = Heat Input Capacity (MMBtu/hr) x 8,760 hrs/yr x 1kgal per 1000 gallon x 1 gal per 0.140 MM Btu

Emission Factors are from AP 42, Tables 1.3-1, 1.3-2, and 1.3-3 (SCC 1-03-005-01/02/03) Supplement E 9/98 (see erata file)
*PM emission factor is filterable PM only. Condensable PM emission factor is 1.3 lb/kgal.
Emission (tons/yr) = Throughput (kgals/ yr) x Emission Factor (lb/kgal)/2,000 lb/ton
See page 5 for HAPs emission calculations.

Appendix A: Emissions Calculations
Two (2) Commercial Boilers (< 100 mmBtu/hr)
#2 Fuel Oil
HAPs Emissions

Company Name: **Parkview Hospital**
Address City IN Zip: **2200 Randallia Drive, Fort Wayne, Indiana 46805**
TV: **003-11993-00272**
Plt ID: **003-00272**
Reviewer: Linda Quigley/EVP
Date: September 10, 2001

HAPs - Metals

	Arsenic	Beryllium	Cadmium	Chromium	Lead
Emission Factor in lb/mmBtu	4.0E-06	3.0E-06	3.0E-06	3.0E-06	9.0E-06
Potential Emission in tons/yr	1.37E-03	1.02E-03	1.02E-03	1.02E-03	3.07E-03

HAPs - Metals (continued)

	Mercury	Manganese	Nickel	Selenium
Emission Factor in lb/mmBtu	3.0E-06	6.0E-06	3.0E-06	1.5E-05
Potential Emission in tons/yr	1.02E-03	2.05E-03	1.02E-03	5.12E-03

Methodology

No data was available in AP-42 for organic HAPs.
Potential Emissions (tons/year) = Throughput (mmBtu/hr)*Emission Factor (lb/mmBtu)*8,760 hrs/yr / 2,000 lb/ton

Appendix A: Emission Calculations
Medical Waste Incinerator - Uncontrolled

Company Name: **Parkview Hospital**
Address City IN Zip: **2200 Randallia Drive, Fort Wayne, Indiana 46805**
TV: **003-11993-00272**
Plt ID: **003-00272**
Reviewer: Linda Quigley/EVP
Date: September 10, 2001

THROUGHPUT lbs/hr	THROUGHPUT ton/yr	Uncontrolled
1200	5256	

	POLLUTANT								
	PM	SO2	CO	VOC	NOX	Lead	HCl	Aluminum*	Antimony
Emission Factor in lb/ton	4.67	2.17	2.95	0.30	3.56	0.07	33.50	1.05E-02	1.28E-02
Potential Emissions in ton/y	12.27	5.70	7.75	0.79	9.36	0.19	88.04	0.03	0.03

	POLLUTANT								
	Arsenic	Barium	Beryllium	Cadmium	Total CDD	Total CDF	Chlorine	Chromium	Copper*
Emission Factor in lb/ton	2.42E-04	3.24E-03	6.25E-06	5.48E-03	2.13E-05	7.15E-05	1.05E-01	7.75E-04	1.25E-02
Potential Emissions in ton/y	6.36E-04	8.51E-03	1.64E-05	1.44E-02	5.60E-05	1.88E-04	2.76E-01	2.04E-03	3.29E-02

	POLLUTANT								
	HBr*	HF	Iron*	Manganese	Mercury	Nickel	Total PCB	Silver*	Thallium*
Emission Factor in lb/ton	4.30E-02	1.49E-01	1.44E-02	5.67E-04	1.07E-01	5.9E-04	4.65E-05	2.26E-04	1.10E-03
Potential Emissions in ton/y	1.13E-01	3.92E-01	3.78E-02	1.49E-03	2.81E-01	1.55E-03	1.22E-04	5.94E-04	2.89E-03

Emission factors are from AP 42 (5th Edition 1/95) Table 2.3-1 through 2.3-13, Emission Factors for Controlled Air Medical Waste Incinerators.
Throughput (lb/hr) * 8760 hr/yr * ton/2000 lb = throughput (ton/yr)
* Noted HAPs are not included in source potential to emit because these HAPs are not listed in the Clean Air Act.

Appendix A: Emission Calculations
Medical Waste Incinerator - Controlled

Company Name: **Parkview Hospital**
Address City IN Zip: **2200 Randallia Drive, Fort Wayne, Indiana 46805**
TV: **003-11993-00272**
Plt ID: **003-00272**
Reviewer: Linda Quigley/EVP
Date: September 10, 2001

THROUGHPUT lbs/hr	THROUGHPUT ton/yr	Controlled
1200	5256	

	POLLUTANT								
	PM	SO2	CO	VOC	NOX	Lead	HCl	Aluminum*	Antimony
Emission Factor in lb/ton	1.48	2.57E-02	2.95	0.14	3.56	0.07	1.39E-01	1.05E-02	4.08E-04
Potential Emissions in ton/y	3.89	0.07	7.75	0.37	9.36	0.19	0.37	0.03	0.00

	POLLUTANT								
	Arsenic	Barium*	Beryllium	Cadmium	Total CDD	Total CDF	Chlorine	Chromium	Copper*
Emission Factor in lb/ton	3.27E-05	3.24E-03	6.25E-06	7.43E-02	1.84E-06	4.92E-06	1.05E-01	1.03E-03	1.25E-02
Potential Emissions in ton/y	8.59E-05	8.51E-03	1.64E-05	1.95E-01	4.84E-06	1.29E-05	2.76E-01	2.71E-03	3.29E-02

	POLLUTANT								
	HBr*	HF	Iron*	Manganese	Mercury	Nickel	Total PCB	Silver*	Thallium*
Emission Factor in lb/ton	4.30E-02	1.49E-01	1.44E-02	6.12E-04	1.73E-02	2.54E-03	4.65E-05	4.33E-04	1.10E-03
Potential Emissions in ton/y	1.13E-01	3.92E-01	3.78E-02	1.61E-03	4.55E-02	6.68E-03	1.22E-04	1.14E-03	2.89E-03

Emission factors are from AP 42 (5th Edition 1/95) Table 2.3-1 through 2.3-13, Emission Factors for Controlled Air Medical Waste Incinerators.
Throughput (lb/hr) * 8760 hr/yr * ton/2000 lb = throughput (ton/yr)
* Not a HAP.

Appendix A: Emission Calculations
Two (2) Natural Gas Turbine
Emergency Generators

Company Name: **Parkview Hospital**
Address City IN Zip: **2200 Randallia Drive, Fort Wayne, Indiana 46805**
TV: **003-11993-00272**
Plt ID: **003-00272**
Reviewer: Linda Quigley/EVP
Date: September 10, 2001

Emissions calculated based on heat input capacity (MMBtu/hr)

Heat Input Capacity
MM Btu/hr

11.5
11.5

23.0

	Pollutant					
	PM*	PM10*	SO2	NOx	VOC	CO
Emission Factor in lb/MMBtu	0.0066	0.0066	0.003	0.320	0.002	0.082
Potential Emission in tons/yr	0.038	0.038	0.020	1.840	0.012	0.472

Methodology

Emission Factors are from AP42 (Supplement B 10/96), Table 3.1-1 and 3.1-2a.
Emission (tons/yr) = [Heat input rate (MMBtu/hr) x Emission Factor (lb/MMBtu)] * 500 hr/yr / (2,000 lb/ton)
Emission (tons/yr) = [Heat input rate (MMBtu/hr) x Emission Factor (lb/MMBtu)] * 500 hr/yr / (2,000 lb/ton)
*PM10 emission factors are assumed to be equivalent to PM emission factors.

Appendix A: Emission Calculations
Internal Combustion Engines - Diesel Fuel
Emergency Generators (>600 HP)

Company Name: **Parkview Hospital**
Address City IN Zip: **2200 Randallia Drive, Fort Wayne, Indiana 46805**
TV: **003-11993-00272**
Plt ID: **003-00272**
Reviewer: Linda Quigley/EVP
Date: September 10, 2001

Emissions calculated based on output rating (hp)

S= 0.3 = WEIGHT % SULFUR

Power Output Horsepower (hp)	Potential Throughput hp-hr/yr	
		3 generators @ 835 HP 1 generator @ 1310 HP 1 generator @ 1325 HP
5140.0	2570000.0	

	Pollutant					
	PM*	PM10*	SO2	NOx	VOC	CO
Emission Factor in lb/hp-hr	0.0007	not provided	0.0024 *(.00809S)*	0.024 **see below	0.00071	0.00550
Potential Emission in tons/yr	0.900	0.000	3.119	30.840	0.906	7.068

**NOx emission factor: uncontrolled = 0.024 lb/hp-hr, controlled by ignition timing retard = 0.013 lb/hp-hr
Note that the PM10 emission factor in lb/hp-hr is not provided in the Supplement B update of AP-42.

Methodology

Potential Throughput (hp-hr/yr) = hp * 500 hr/yr
Emission Factors are from AP 42 (Supplement B 10/96)Table 3.4-1.
Emission (tons/yr) = [Potential Throughput (hp-/hr/yr) x Emission Factor (lb/hp-hr)] / (2,000 lb/ton)
PTE was calculated using 500 hours per year for emergency generator.

* No information was given regarding which method was used to determine the PM emission factor or whether condensable PM is included.

Appendix A: Emissions Calculations
Medical Waste Incinerator - Controlled with Wet Scrubber
Compliance with 326 IAC 4-2-2

Company Name: **Parkview Hospital**
Address City IN Zip: **2200 Randallia Drive, Fort Wayne, Indiana 46805**
TV: **003-11993-00272**
Plt ID: **003-00272**
Reviewer: Linda Quigley/EVP
Date: September 10, 2001

Controlled potential PM emissions	0.89	lb/hr
Stack gas flow rate	7500.00	acfm
Gas temperature	95.00	deg F
Incinerator Throughput	1200.00	lb/hr

Q,std = **Volumetric flow rate at Standard Temperature**

Q,std = 7500 acfm x $\frac{529}{554.00}$ deg R = **7161.55** dscfm

Cs = **PM Concentration**

Cs = $\frac{0.89}{7161.55}$ lb/hr / dscfm x $\frac{7000}{60}$ gr/lb / min/hr = **0.014** gr/dscf

Corrected to 50% excess air

Cs, corrected = 0.014 gr/dscf x $\frac{(100+0)\%}{150\%}$ = **0.010** gr/dscf

Ideal Gas Law

Specific Volume = $\frac{R \times T}{P \times Mw}$ where

R = gas constant = 21.9(in Hg)(ft^3) / (lb mol)(deg R)
T = standard temp = 529 deg R
P = standard pressure = 29.45 in Hg
Mw = avg molecular weight of air = 29 lb/lbmol

Specific Volume = **13.565** cf/lb air

Cs, corrected = 0.010 gr/dscf x 13.565 cf/lb air = **0.131** gr/lb air

0.131 gr/lb air x 1/7000 lb pm/gr = 0.00002 lb PM/lb dry gas = **0.0187** lb PM/1000 lb dry gas

Maximum allowable particulate emission pursuant to 326 IAC 4-2-2 is 0.3 lb PM/1000 lb dry gas.
The medical waste incinerator, with control by a wet scrubber, is in compliance with 326 IAC 4-2-2.